Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 1 of 223 PAGEID #: 30

EXHIBIT A



BUSINESS IMMIGRATION SOLUTIONS

May 30, 2017

Via Federal Express

USCIS

Attn: AOS

2501 S. State Highway 121 Business

Suite 400

Lewisville, TX 75067

RE: EB-1C Petition Filed Concurrently with Adjustment of Status

Form I-140, Immigrant Petition for Alien Worker (EB-1C)

Form I-485, Application for Adjustment of Status

Form I-131, Application for Advance Parole

Form I-765, Application for Employment Authorization

PETITIONER:

LSS Software Holdings, Inc.

BENEFICIARY:

Mr. Bjorn LARSEN

Dear Sir or Madam:

The above-referenced beneficiary is eligible to apply for Adjustment of Status to Lawful Permanent Resident upon approval of the concurrently filed Form I-140, Immigrant Petition for Alien Worker under INA §203(b)(1)(C) Multinational Executive. The following documents are submitted in support of these requests:

Immigrant Petition for Alien Worker

- 1. <u>Form G-28</u>, <u>Notice of Appearance as Attorney</u>, on behalf of the above-referenced Petitioner together with the filing fee of \$700.00 and two passport-style photos;
- 2. Form I-140, Immigrant Petition for Alien Worker; and

BUFFALO TORONTO NEWPORT BEACH LONDON

 Letter in Support of the Petition with accompanying evidence per the attached Table of Contents (yellow).

Adjustment of Status - Bjorn Larsen

- 1. Form G-28, Notice of Appearance as Attorney together with a check in the amount of \$1,225.00 for the filing fee and biometrics fee;
- 2. Six (6) passport-style photos;
- 3. Form G-325A, Biographic Data Page;
- 4. Form I-485, Application to Register Permanent Residence or Adjust Status;
- 5. Form I-131, Application for Travel Document;
- 6. Form I-765, Application for Employment Authorization; and
- Copies of passport biographic page, I-94 record as of 5/30/2017 (filing date),
 Form I-797 L-1 Approval Notice, Birth Certificate with Translation, two (2)
 Divorce Certificates.

Thank you for your time and consideration of this matter. If you require additional information, please do not hesitate to contact this office.

Very truly yours,

BERARDI IMMIGRATION LAW

Jennifer Behm, Esq.

Partner

Enclosures

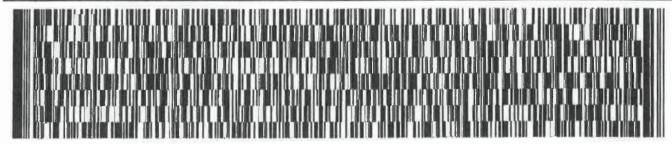


Notice of Entry of Appearance as Attorney or Accredited Representative

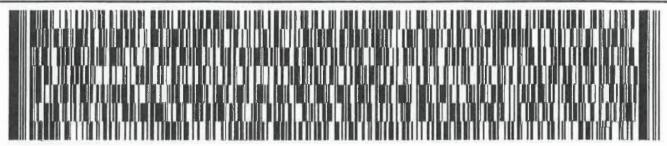
Department of Homeland Security

DHS Form G-28 OMB No. 1615-0105 Expires 03/31/2018

11/10/17/00	rt 1. Informs credited Rep	tion About Attorney or resentative	100000	rt 2. Notice of credited Rep	of Appearance as Attorney or resentative
1.	USCIS ELIS A	ccount Number (if any)		appearance rela	tes to immigration matters before):
	me and Addre	ess of Attorney or Accredited	1.a. 1.b.	List the form no	
2.a.	Family Name (Last Name)	Behm	2,8,	Form I-140)
2.b.	Given Name (First Name)	Jennifer	2.b.		c matter in which appearance is entered
2.c.	Middle Name				
3.a.	Street Number and Name	2300 Wehrle Drive	3.a.	□ СВР	
3.b.	Apt. Ste,	☐ Fir. ☐ [3.b.	List the specifi	c matter in which appearance is entered
3.c.	City or Town	Buffalo]		and the same of the description of the same of the sam
3.d.	State NY	3.e. ZIP Code 14221		er my appearant equest of:	e as attorney or accredited representative a
3.f.	Province		4.	Select only on	
J.1.			_		Petitioner Requestor
3.g.	Postal Code]	Responder	nt (ICE, CBP)
3.h.	Country		ı Ini	ormation Abo	out Applicant, Petitioner,
	USA		_	questor, or Re	
4.	Daytime Teleph	none Number	5.a.	Family Name	SCHLEGEL
	7166341010]	(Last Name)	SCHLEGEL
5.	Fax Number		5.b.	Given Name (First Name)	Jim
	7166341074		5.c.	Middle Name	
5.	E-Mail Address	(if any)	¬ 6,	Name of Comp	namy or Organization (if applicable)
	jebehm@usi	mmlawyer.com	0.		are Holdings Inc
7.	Mobile Telepho	ne Number <i>(if any)</i>	7	DOD GOTCMG	110 Hordingo ano



Part 2. Notice of Appearance as Attorney or Accredited Representative (continued)			Part 3. Eligibility Information for Attorney or Accredited Representative		
-		ut Applicant, Petitioner, spondent (continued)	Sele	ct all applicable items. X I am an attorney eligible to practice law in, and a	
7. 8.	▶ [on Number (A-Number) or Receipt Number		member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. (If you need additional space, use Part 6.) Licensing Authority	
9.	Daytime Telepl	none Number		NYS Ct of Appeals 4th Dept	
	2147663215		1.b.	Bar Number (if applicable)	
10.	Mobile Telepho	one Number (if any)		N/A	
10,	Tricond Totoping	Me Transon (g 6/19)	1.c.	Name of Law Firm	
11.	E-Mail Address	: lif am)		Berardi Immigration Law	
		leanindustries.com	1.d. I (choose one) X am not am		
Requaddraserve	questor, or Res TE: Provide the restor, or respondences of the attorners as the safe mai	mailing address of the applicant, petitioner, ent. Do not provide the business mailing y or accredited representative unless it ling address on the application, petition, or	2,a.	disbarring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law. If you are subject to any orders, explain in the space below. (If you need additional space, use Part 6.) I am an accredited representative of the following	
•	Street Number and Name	th this Form G-28. 159 Linwood Avenue		qualified nonprofit religious, charitable, social service, or similar organization established in the United States, so recognized by the Department of Justice, Board of Immigration Appeals, in accordance	
12.b	Apt. Ste.	Flr		with 8 CFR 292.2. Provide the name of the	
12.c.	City or Town	Buffalo	2.h.	organization and the expiration date of accreditation. Name of Recognized Organization	
12.d	. State NY	12.e. ZIP Code 14209		Thin of Headyman Organization	
12.f.	Province		2.c.	Date accreditation expires	
12.g.	Postal Code			(mm/dd/yyyy)	
12.h.	Country				
	USA				



Part 3. Eligibility Information for Attorney or Accredited Representative (continued)

3. I am associated with

the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative is at his or her request.

NOTE: If you select this item, also complete Item Numbers 1.a. - 1.b. or Item Numbers 2.a. - 2.c. in Part 3. (whichever is appropriate).

- 4.a. I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2)(iv).
- 4.b. Name of Law Student or Law Graduate

Part 4. Applicant, Petitioner, Requestor, or Respondent Consent to Representation, Contact Information, and Signature

Consent to Representation and Release of Information

 I have requested the representation of and consented to being represented by the attorney or accredited representative named in Part 1. of this form. According to the Privacy Act of 1974 and DHS policy, I also consent to the disclosure to the named attorney or accredited representative of any record pertaining to me that appears in any system of records of USCIS, ICE or CBP.

When you (the applicant, petitioner, requestor, or respondent) are represented, DHS will send notices to both you and your attorney or accredited representative either through mail or electronic delivery.

DHS will also send the Form I-94, Arrival Departure Record, to you unless you select Item Number 2.a. in Part 4. All secure identity documents and Travel Documents will be sent to you (the applicant, petitioner, requestor, or respondent) at your U.S. mailing address unless you ask us to send your secure identity documents to your attorney of record or accredited representative.

If you do not want to receive original notices or secure identity documents directly, but would rather have such notices and documents sent to your attorney of record or accredited representative, please select all applicable boxes below:

- 2.a I request DHS send any notice (including Form I-94) on an application, petition, or request to the U.S. business address of my attorney of record or accredited representative as listed in this form. I understand that I may change this election at any future date through written notice to DHS.
- 2.b. I request that DHS send any secure identity document, such as a Permanent Resident Card, Employment Authorization Document, or Travel Document, that I am approved to receive and authorized to possess, to the U.S. business address of my attorney of record or accredited representative as listed in this form or to a designated military or diplomatic address for pickup in a foreign country (if permitted). I consent to having my secure identity document sent to my attorney of record or accredited representative's U.S. business address and understand that I may request, at any future date and through written notice to DHS, that DHS send any secure identity document to me directly.

3.a. Signature of Applicant, Petitioner, Requestor, or Responden

3.b. Date of Signature (mm/dd/yyyy) ▶

05 24 2017

Part 5. Signature of Attorney or Accredited Representative

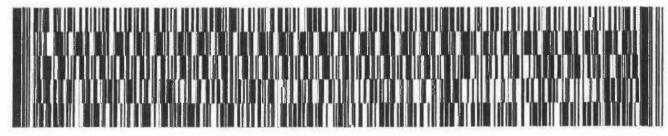
I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. Signature of Attorney or Accredited Representative

2. Signature of Law Student or Law Graduate

3. Date of Signature (mm/dd/yyyy)

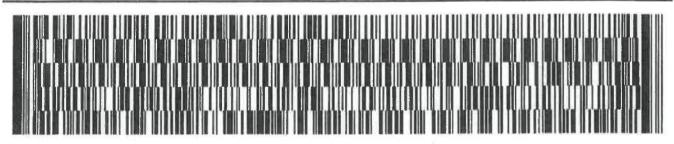
5/30/2017



		nation

Use the space provided below to provide additional information pertaining to Part 3., Item Numbers 1.a. - 1.d. or to provide your U.S. business address for purposes of receiving secure identity documents for your client (if your client has consented to your receipt of such documents under Part 4.)

No explanations.	
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Immigrant Petition for Alien Worker

USCIS Form I-140 OMB No. 1615-0015 Expires 04/30/2018

Department of Homeland SecurityU.S. Citizenship and Immigration Services

Fee Stamp Prior USCIS Use Only	rity Date Consulate	Action Block
203(b)(1)(3) Outstanding 203(b)(3)(A)(i) Skilled Worker 5 203(b)(1)(C) Multimational 203(b)(3)(A)(ii) Professional		
1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name 2. Company or Organization Name LSS Software Holdings, Inc. Other Information 3. IRS Tax Number must be 9 digits: no dashes 4 5 4 4 5 6 9 3 4. U.S. Social Security Number (if any) must be 9 digits: no dashes	5.a. In Care of Bjorn 5.b. Street No and Nam 5.c. Apt. 5.d. City or 7 5.e. State No 5.g. Postal Co 5.h. Province 5.i. Country	Interpolation of Name Larsen Interpolation of Name Interpolation of Name Item
Part 2. Petition Type	11 7 129	The Line and the
 Chis petition is being filed for: (Select only one box): .a. An alien of extraordinary ability. .b. An outstanding professor or researcher. .c. A multinational executive or manager. .d. A member of the professions holding an advanced degree or an alien of exceptional ability (who is NO seeking a National Interest Waiver). .e. A professional (at a minimum, possessing a bachelor's degree or a foreign degree equivalent to a U.S. bachelor's degree). 	train I.h. (Res I.i. An a (who adva T Check below i 2.a. To a	other worker (requiring less than 2 years of sing or experience). served) alien applying for a National Interest Waiver to IS a member of the professions holding an anced degree or an alien of exceptional ability), if this petition is being filed: amend a previously filed petition. vious Petition Receipt Number:
.f. A skilled worker (requiring at least 2 years of specialized training or experience)	2.b. [] For	the Schedule A, Group I or II designation.

1.a.	Family Name LARSEN	9.	Country of Citizenship
	(Last Name)]	Canada & Norway
.D.	Given Name (First Name)	10.	Country of Nationality
.c.	Middle Name		Canada & Norway
Ма	iling Address	11.	Alien Registration Number (A-Number)
.a.	In Care of Name		▶ A-
	Bjorn Larsen] 12.	U.S. Social Security Number (if any)
.b.	Street Number and Name 159 Linwood Ave]	must be 9 digits; no dashes 0 6 7 6 0 2 9 0
.c.	Apt. Ste, Fir.]	
.d.	City or Town Buffalo		the United States, please provide the following plete all sections, as applicable):
.c.	State NY 2.f. Zip Code 14209	13,	Date of Arrival (mm/dd/yyyy)
.g.	Postal Code	14.a.	1-94 Arrival-Departure Record Number:
	Province]]	•
]]4.b,	Passport Number GK584922
i.	USA	140	Travel Document Number
71	er Information	-	Country of Issuance for Passport or Travel Document
		14.0.	Canada
	E-mail Address (if uny) blarsen@leanindustries.com	140	Expiration Date for Passport or Travel Document
		1	(mm/dd/yyyy) ➤ 06/08/2025
•	Daytime Phone Number (3:0 7) 2:7:5 - 6 9 5 6	1	
	Date of Birth (mm/dd/yyyy) > 05/03/1950	15.	Current Nonimmigrant Status
	City/Town/Village of Birth	10	L-1
	Sandnes	16.	Date Status Expires: (min/dd/yyyy)
	State/Province of Birth	1	(min/da/yyyy) 07/20/2018
		J	
•	Country of Birth Norway	1	
	Notway	J	
?art	4. Processing Information		是建筑是100mm,100mm,100mm。
Chec	olete the following for the person named in Part 3:	1.b.	Alien is in the United States and will apply for adjustment of status to that of lawful permanent resident.
я.	Alien will apply for a visa abroad at a U.S. Embassy or consulate at: City or Town	1	Alien's country of current residence or, if now in the United States, last country of permanent residence abroad.
		1	

Pa	rt 4. Processi	ng Information (continued)		30 ME 11 11 11 11 11 11	(E-62) N	Palen	
	ou provided a Unition's foreign addre	ted States address in Part 3, provide the	4.	Are any other petition(this Form 1-140?	(s) or applica	tion(s) be	
2.a.		1711-18 Graydon Hall Drive		If you answered "Yes,"	" check any s	_	
2.b.	and Name			Form I-485	CHOOK any a	гррпоаотс	boxes,
2.D.	Apt. Ste.	Fir.		Form I-131			
2.c.	City or Town	Toronto		Form 1-765			
2.d.	Postal Code	M3A 0A2		Other-Attach an e	xplanation		
2.e.	Province	Ontario	5. Is the person for whom you are filing in rea		ng in rem	moval	
2.f.	Country	da		proceedings? Yes	- Attach an	explanatio	on 🛭 No
	e person's native a	alphabet is other than Roman letters, write	6.	Has any immigrant vis behalf of this person?			
-	Family Name			Yes	- Attach an e	explanatio	on 🔀 No
3.b.	(Last Name) L Given Name (First Name)		7.	Is the petition being fill certification because the previously submitted in	ne original la	oor certif	cation was
3.c.	Middle Name				- Attach an		
	iling Address Street Number	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	8.	If the petition is being for certification, are you re duplicate labor certifications.	questing that	USCIS re	equest a
J.u.	and Name			•	- Attach an c		
3.e.	Apt. Ste.	☐ Fir, ☐					
3.f.	City or Town		prov	u answered "Yes" to a ride the case number, o disposition of the decis	ffice location	n, date of	decision,
3.g.	Postal Code						
3.h.	Province						
3.i.	Country						
Par	t 5. Additions	al Information About the Petitioner			Tallian A	Citie.	ewill.
Туре	of petitioner (Sel	ect only one box):	2.c.	Current Number of U.S.	Employees		
La.	Employer			13			
1.b.	Self		2.d.	Gross Annual Income	\$2.83 milli	on	
1.c.		nin, e.g., Permanent Resident, U.S. citizen	2.e.	Net Annual Income			
	Of any other	person filing on behalf of the alien)	2,f.	NAICS Code	_		
lfac	ompany, give the	following:	۵,1,	HANDA COUR		5 5	1 1 1 2
	Type of Business	_	2.g.	Labor Certification DC	L/ETA Case	Number	
		er software solutions for financial institutions		N/A			
2.b.	Date Established	(mm/dd/yyyy) ▶ 01/08/2010					

l.h.	Labor Certification DOL/ETA Filing Da	nte	Ifan	individual, giv	ve followi	ng:		
	(mm/dd/yyyy)		3.a.					
				Founder &	CEO			
Li.	Labor Certification Expiration Date	1	3.b.	Annual Incom	ne	\$240,00	nn	
	(mm/dd/yyyy)					4240,00		
Pa	rt 6. Basic Information About th	e Proposed Em	ployme	nt in the	HOEN.	TW		
	Job Title Founder & CEO		6.	Is this a perm	anent pos	ition?	X Yes	No No
	SOC Code	- 1 0 1 1	7.	ls this a new	position?		Yes	No
	Nontechnical Description of Job		8.	Wages: \$			per month	
	Chief executives determine and formul provide overall direction of companies public sector organizations within guid	or private and elines set up by	Addr Part	ess where the			month, or year different from	•
	a board of directors or similar governing also plan, direct, or coordinate operation the highest level of management with the subordinate executives and staff management.	onal activities at he help of		Street Numbe and Name	7915 V	Vashingtor	n Wood Drive	
	_	Yes No	9.b.	Apt. Ste	e. 🗌 F	lr. 🗌 🛚		
	If the answer to Number 4 is "No," how		0 -	Older on Torres				
		many hours per	9.c.	City or Town	Dayto	on		
	week for the position?	many hours per		State OH	, <u> </u>	Zip Code	45459	
ist		All Children of the individual for v	9.d. the Per	State OH son for Wh	9.e. 7	Zip Code Are Fil	ling	
ist oply tac	week for the position? rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of s	All Children of the individual for v	9.d. The Per whom the	State OH son for Wh	9.e. 7	Zip Code Are Fil	ling	
ist oply tac	rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if needs to the same of the same	All Children of the individual for v	9.d. The Per whom the	State OH son for Wh petition is beindividual for y	9.e. 2	Zip Code Are Fil	ling	
ist pply tac	week for the position? rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if needs to the state of the state	All Children of the individual for v	9.d. The Per whom the ent of the i	State OH son for Wh petition is beindividual for v son 2 Family Name	9.e. 2	Zip Code Are Fil	ling	
er a.	rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if need son I Family Name (Last Name) Given Name	All Children of the individual for v	9.d. The Per whom the ent of the in Pers 2.a.	State OH son for Wh petition is beindividual for v son 2 Pamily Name (Last Name) Given Name	9.e. 7	Zip Code Are Fil	ling	
ist pply tac er a.	rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if need to som I Family Name (Last Name) Given Name (First Name)	All Children of the individual for v	9.d. The Perwhon the interpretation of the	son for Whe petition is beindividual for vison 2 Family Name (Last Name) Given Name (First Name)	9.e. 2	Zip Code Are Fil	ling of the individent filed. Provide	
ist pply tac er a. b.	rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if needs to som I Family Name (Last Name) Given Name (First Name) Middle Name	All Children of the individual for v	9.d. The Perwhon the ent of the incomparison	son for Whe petition is beindividual for version 2 Family Name (Last Name) Given Name (First Name) Middle Name	9.e. 2	Are Fil Also, note petition is	ling of the individent filed. Provide	
er d.	rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if need to som I Family Name (Last Name) Given Name (First Name) Middle Name Date of Birth (mm/dd/yyyy)	All Children of the individual for v	9.d. The Perwhon the ent of the incomparison	son for Whe petition is beindividual for version 2 Family Name (Last Name) Given Name (First Name) Middle Name	9.e. 2	Are Fil Also, note petition is	ling of the individent filed. Provide	
ist opiy tac	rt 7. Information on Spouse and husband/wife and all children related to ying for a visa abroad or for adjustment of shment of additional family members, if needs and the state of the sta	All Children of the individual for v	9.d. The Perwhom the ent of the interpretation of the interpretat	son for Whe petition is beindividual for vison 2 Family Name (Last Name) Given Name (First Name) Middle Name Date of Birth Country of Bi	9.e. 2	Are Fil Also, note petition is	ling of the individent filed. Provident	an

Form 1-140 01/17/17 N Page 4 of 6

Part 7. Information on Spouse and All Children of the Person for Whom You Are Filing (continued)				
Per	rson 3	Person 5		
3.a.	Family Name (Last Name)	5.a. Family Name		
3.b.		(Last Name) 5.b. Given Name (First Name)		
3.c.	Middle Name	5.c. Middle Name		
3.d.	Date of Birth (mm/dd/yyyy) ▶	5.d. Date of Birth (mm/dd/yyyy) ▶		
3.e.	Country of Birth	5.e. Country of Birth		
3.f.	Relationship	5.f. Relationship		
3.g.	Applying for Adjustment of Status? Yes No	5.g. Applying for Adjustment of Status? Yes No		
3.h.	Applying for Visa Abroad?	5.h. Applying for Visa Abroad?		
Per	son 4	Person 6		
4.a.	Family Name (Lust Name)	6.a. Family Name (Last Name)		
4.b.	Given Name (First Name)	6.b. Given Name (First Name)		
4.c.	Middle Name	6.c. Middle Name		
4.d.	Date of Birth (mm/dd/yyyy) ▶	6.d. Date of Birth (mm/dd/yyyy)		
4.e.	Country of Birth	6.e. Country of Birth		
4.f.	Relationship	6.f. Relationship		
4.g.	Applying for Adjustment of Status? Yes No	6.g. Applying for Adjustment of Status? Yes No		
4.h.	Applying for Visa Abroad? Yes No	6.h. Applying for Visa Abroad? Yes No		
Par	t 8. Signature of Petitioner			
of An true a (USC my U to det	fy, under penalty of perjury under the laws of the United States nerica, that this petition and the evidence submitted with it are all nd correct. I authorize U.S. Citizenship and Immigration Services IS) to release to other government agencies any information from SCIS records, if USCIS determines that such action is necessary ermine eligibility for the benefit sought. Signature of Pentioner Date of Signature (mm/dd/yyyy) O5 24 2017	 Daytime Phone Number (214) 766 - 3215 Mobile Phone Number (214) 766 - 3215 E-mail Address (if any) Chled @leanindustries.com Job Title of Position with Petitioning Employer, If the Petition Is Being Filed by an Employer IVP. Salch & Cliver NOTE: If you do not fully complete this form or fail to submit the required documents listed in the instructions, a final decision on your petition may be delayed or the petition may be denied. 		

Pa	rt 9. Signature of Person Preparing This Petition	, If Other Than the Petitioner
1,	Attorney or Representative: In the event of a Request for Evidence (RFE), may USCIS contact you by e-mail?	Preparer's Mailing Address
	X Yes ☐ No	6.a. Street Number and Name 2300 Wehrle Drive
Pre	parer's Full Name	6.b. Apt.
Prov	ride the following information concerning the preparer:	6.c. City or Town Buffalo
2.a.	Preparer's Family Name (Last Name)	6.d. State NY 6.e. Zip Code 14221
	Behm	6.d. State NY 6.e. Zip Code 14221
2.b.	Preparer's Given Name (First Name)	6.f. Postal Code
	Jennifer	6.g. Province
3.	Preparer's Business or Organization Name	
	Berardi Immigration Law	6.h. Country UNITED STATES OF AMERICA
Pre	parer's Contact Information	Declaration
4.	Preparer's Daytime Phone Number Extension	To be completed by all preparers, including attorneys and authorized representatives: I declare that I prepared this petition
	(718)634-10:10	at the request of the petitioner, that it is based on all the information of which I have knowledge, and that the information
5.	Preparer's E-mail Address (if any)	is true to the best of my knowledge.
	jebehm@usimmlawyer.com	7.a. Signature of Preparer
		7.b. Date of Signature (mm/dd/yyyy) > 530 > 17

Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 14 of 223 PAGEID #: 43

Addendum

LARSEN, Bjorn, Form: I-140 (Page 1)

Addendum:

Please note that the mailing address for our company is:

159 Linwood Avenue Buffalo, NY 14209

and our company's physical address is:

7915 Washington Wood Drive Dayton, OH 45459



May 19, 2017

Via FedEx

USCIS Attn: AOS 2501 S. State Highway 121 Business Suite 400 Lewisville, TX 75067

Re: EB-1C Immigrant Petition for Alien Worker (Form I-140)

Filed Concurrently with Application to Adjust Status (Form I-485)

PETITIONER: LSS Software Holdings, Inc.

BENEFICIARY: Mr. Bjorn LARSEN

Dear Sir or Madam:

This letter is submitted in support of the Employment-Based (EB-1) petition of LSS Software Holdings, Inc. on behalf of Mr. Bjorn Larsen, a citizen of Canada and national of Norway, who qualifies as a Multinational Executive under §203(b)(1)(C) of the Immigration and Nationality Act.

Mr. Larsen is the Founder and CEO of LSS Software Holdings, Inc., a U.S. company that provides workflow-based dispute management software for financial institutions, as further described below.

We respectfully submit that Mr. Larsen qualifies for Lawful Permanent Resident Status as a Multinational Executive under INA §203(b)(1)(C) because:

- 1. Mr. Larsen was employed abroad in an executive position by Lean Software Services, Inc., the parent company of the U.S. petitioner, immediately prior to entering the U.S. in L-1 status;
- 2. Mr. Larsen seeks to enter the U.S. as an immigrant to continue to render services to LSS Software Holdings, Inc. in an executive capacity; and
- 3. Mr. Larsen has the required job offer as a Multinational Executive, and no Labor Certification is required for the position.

We enclose copies of Mr. Larsen's passport biographic page, I-94 record, and Form I-797 Approval Notices (Exhibit A). These documents evidence the applicant's identity, citizenship and current nonimmigrant status in the U.S.

PETITIONER BACKGROUND INFORMATION

Lean Software Services, Inc. (Canadian parent company) and LSS Software Holdings, Inc. (U.S. petitioner) develop and deliver comprehensive enterprise software solutions designed to lower the costs and improve the quality of managing consumer and fraud disputes, exceptions, and adjustments for electronic payment transactions.



Our solutions enable organizations of all types and sizes to become highly efficient and productive through extensive process automation, elimination of paper-based practices, and integration with critical enterprise payment applications. A highly-configurable workflow-based solution, our proprietary AdjustmentHub™ software is typically installed on premise at large financial institutions and merchant acquiring companies. Our employees across North America are experts in this field and provide customized computer hardware and software services, including implementation, training, and customization to match a client's needs.

For the year ended December 31, 2016, our companies had consolidated revenue in sales of more than \$5.5 million, and consolidated assets of more than \$5.3 million. We have 34 employees in the U.S., Canada, and Portugal. We have clients across the globe in more than 20 countries. In support of our company's global operations, we enclose:

- Exhibit B Consolidated financial statements for the year ended December 31, 2016;
- Exhibit C Organizational chart showing all of our global employees and prospective positions open for hire;
- Exhibit D Background information on our company from our corporate website (www.leanindustries.com); and
- Exhibit E Corporate Brochure on our AdjustmentHub™ software.

Canadian Operations

Founded by the beneficiary, Bjorn Larsen, Lean Software Services, Inc. was incorporated in the Province of Ontario, Canada on January 23, 2002. For the year ended December 31, 2016, we had sales in Canada of more than \$3.3 million. Our global headquarters office is located in Richmond Hill, Ontario, and we currently employ 15 full-time team members.

As evidence of our viable Canadian operations, we enclose:

- Exhibit F Certificate of Incorporation;
- Exhibit G Canadian Corporate Tax Return for the year ended December 31, 2016, reflecting the company's total sales revenues of more than \$3.3 million and assets of more than \$4.7 million;
- Exhibit H Google Maps confirmation for our office located at 45B West Wilmot St, Suite 215, Richmond Hill, Ontario, Canada;
- Exhibit I Organizational chart for our Canadian team.

U.S. Petitioner's Operations

Due to the demand for our services in the U.S., LSS Software Holdings, Inc. was incorporated in the state of Delaware on January 8, 2010. For the year ended December 31, 2016, we had sales in the U.S. of more than \$2.8 million. Our U.S. headquarters office is located in Dayton, OH. We currently employ 10 full-time employees in our Dayton office, and we're hiring for two additional positions.

LSS Software Holdings, Inc., Inc. (the U.S. petitioner) is a wholly-owned subsidiary of Lean Software Services, Inc. (the Canadian parent company).

As evidence of our viable operations in the U.S., we enclose:



- Exhibit J Stock certificate demonstrating Lean's 100% ownership of all 1,000 issued shares of LSS Software;
- Exhibit K Certificate of Incorporation and Certificate of Revival/Renewal;
- Exhibit L Form 1120, Corporate Income Tax Return for the year ended 12/31/2016 showing \$2.8 million in income, \$716,171 paid in wages, and \$865,705 in assets;
- Exhibit M Google Maps confirmation and lease for our U.S. office located at 7915 Washington Wood Drive, Dayton, OH;
- Exhibit N Organizational chart for our U.S. team.

BENEFICIARY'S QUALIFYING EMPLOYMENT ABROAD

Mr. Larsen has been continuously employed on a full-time basis by Lean Software Services, Inc. since he founded the entity in 2002. He has held L-1A status with Lean's wholly-owned subsidiary and the U.S. petitioner of this EB-1C petition, LSS Software Holdings, Inc. We enclose evidence of Mr. Larsen's ongoing employment with the company and continued L-1A status (**prior Exhibit A**).

MULTI-NATIONAL EXECUTIVE: BJORN LARSEN, FOUNDER AND CEO

Mr. Larsen is the Founder and CEO of Lean Industries in Canada, and its wholly-owned subsidiary, LSS Software Holdings, Inc. in the United States. In this position, he has been responsible for managing and directing all business operations of the company from the ground up since its inception in Canada in 2006.

History of the Company and Mr. Larsen's Executive Leadership

Prior to founding Lean Industries, Mr. Larsen was an owner and executive of Canadian-based Automated Integrated Solutions, Inc. (AIS), a provider of advanced technologies driving the monitoring and communication requirements of large ATM networks. In 2000, Mr. Larsen sold AIS to the Carreker Corporation of Dallas, TX for \$2.3 million. At that time, he in initiated talks with former customers to research potential new software product opportunities in the financial industry. During these discussions, he was introduced to the "Adjustment Department" at Genpass Corporation in Dallas, TX (now U.S. Bank, following a 2005 acquisition). Genpass/U.S. Bank is a leading provider of electronic funds transfer (EFT), automated teller machine (ATM), and debit processing services to financial institutions and other clients. Mr. Larsen immediately recognized the amount of manual work efforts and mountains of paper records, and he saw the need for the financial institution to interface to a large number of network systems for data entries. Thus, the idea for AdjustmentHub™ was sparked.

In 2002, Mr. Larsen incorporated Lean Software Services, Inc. in Canada. Genpass/U.S. Bank agreed to "finance" the development of AdjustmentHub™ Release 1.0, and Lean retained all IP rights to the code. Mr. Larsen outlined the requirements for the system and with an early partner (now retired), they constructed the first imaging/workflow system interfacing to MasterCard (a worldwide first for debit transactions). U.S. Bank subsequently utilized his system in Dallas, TX and Pittsburgh, PA from 2004 until 2013. AdjustmentHub™ was also sold to several European customers (eService in Poland and Euronet in Hungary) along with Woodforest Bank in Houston, TX, as well as Keybank in



Cleveland, OH. The growing demand for the software system culminated in the AdjustmentHub™ Release 3.0 in 2008. By this time, Mr. Larsen hired four (4) full-time employees with Lean's Canadian office.

In continual pursuit of even larger opportunities for his business, Mr. Larsen continued to expand and sell his financial workflow system. Customers included major financial intuitions, such as: Columbus Data, a leading ATM and issuer processor headquartered in Dallas, TX; Cardtronics, the world's largest non-bank ATM operator, headquartered in Houston, TX; SIBS in Portugal, which is the central utility for payments serving all banks and the government; and many more.

In 2012, after identifying the need for a physical U.S. presence, Mr. Larsen incorporated LSS Software Holdings, Inc. in the U.S. as a direct subsidiary of his company in Canada. He established offices in Houston, TX and in Dayton, OH, where the company continues to operate its U.S. headquarters office today. Shortly thereafter, he struck a major distribution deal with ACI Worldwide (NASDAQ: ACIW), a payment systems company in Omaha, NE. He immediately hired a Senior Sales and Marketing Executive, and Customer Support personnel as the customer base expanded over the years.

Today, Mr. Larsen continues to drive the company's corporate strategy and growth plan, R&D, sales and support efforts through the teams he manages in Toronto, Ontario; Dayton, Ohio; and Lisbon, Portugal. The company now employs 34 professionals across Canada, the U.S. and Europe (Portugal), and we have over 20 customers on three continents. The combined companies are expected to grow to 40 people by the end of 2017, reaching more than \$6 million in combined revenues.

Beneficiary's Executive Job Duties

As the CEO of Lean Industries and LSS Software, Mr. Larsen oversees all operation areas of the company's global operations through direct supervision of managers. He is responsible for developing and maintaining a positive corporate image and relationships between the company and key customers. He also develops and oversees the execution of plans for continued growth, expansion and improvement of the company's products and services. Mr. Larsen handles negotiations with stakeholders on the company's behalf, and he acts as the final authority for employee relations and personnel matters in both his U.S. and Canadian offices. A specific breakdown of Mr. Larsen's executive job duties follows:

- Develop high quality business strategies and plans; ensure their alignment with short-term and long-term objectives for the company and identify opportunities that achieve corporate goals; implement policies, approve procedures, delegate tasks, monitor and oversee all operations and business activities to ensure these actions produce desired business results and are consistent with the company's overall strategy and mission (20% of time or 8 hours per 40/hour week);
- Oversee and collaborate with the management team to develop and implement plans for the
 operational infrastructure of systems, processes and personnel designed to accommodate the
 growth objectives of the company; develop a high performing management team and indirect
 reports by leading and motivating subordinates; act as final decision-maker and authority on
 hiring, firing, promotions, discipline and employee relations matters; (20% of time or 8 hours
 per 40/hour week);



- Act as face of the company through direct contact with high-level clients and business partners; drive the company to achieve and surpass sales, profitability, cash flow and business goals and objectives through relationships with partners and by establishing credibility within the industry (20% of time or 8 hours per 40/hour week);
- Review financial and formal corporate reports to ensure business performance is aligned with corporate goals; identify solutions or improvements to achieve revenues and growth (15% of time or 6 hours per 40/hour week);
- Analyze problematic situations and occurrences and provide solutions; delegate tasks to ensure company survival and growth (10% of time or 4 hours per 40/hour week);
- Maintain a deep knowledge of the markets and industry of the company (10% of time or 4 hours per 40/hour week); and
- Enforce adherence to legal guidelines and in-house policies to maintain the company's legality and business ethics; ensure that the company maintains compliance with applicable laws and regulations (5% of time or 2 hours per 40/hour week).

Mr. Larsen has the ultimate authority to direct and control all aspects of our operations in Canada and the U.S. He establishes the policies of the company and its overall business direction, and he acts as the voice and face of our company to the public. Mr. Larsen also exercises day-to-day discretion and ultimate authority over organizational operations, including managerial and supervisory staff.

Beneficiary's Direct and Indirect Reports

In carrying out these managerial duties, Mr. Larsen oversees his direct reports in the Canadian and U.S. offices, who in turn manage his indirect reports. These individuals include the following professionals, all of whom hold a Bachelor's degree or higher and perform high-level, managerial tasks:

- Jim Schlegel Vice President, Sales & Delivery (Dayton, OH) 4 direct report Managers, who in turn have a combined 14 indirect reports.
- Greg Cooper Vice President, Product Development (Toronto) 10 direct reports
- Brent Wathen Director, Network Technologies (Toronto)
- Chris Sloan Manager, Financial & Operational Services (Toronto) 1 direct report

Please refer to the global, U.S., and Canadian organizational charts at Exhibit C, Exhibit I, and Exhibit N. These charts specifically notate the professional managerial positions whom directly report to Mr. Larsen. Neither Mr. Larsen nor his managerial reports are responsible for administrative activities; all are engaged in high-level tasks that directly impact the company's operations and growth plans.

Mr. Larsen also travels regularly to see customers in every region and is currently organizing new product development efforts (NetworkHub) as well as contemplating moving the product line to a cloud channel under the SaaS model. We enclose a selection of news articles citing partnerships



between Lean Industries and customers of the company's software services, quoting Mr. Larsen as the CEO of the company (Exhibit P).

The position of CEO is a distinct executive role within our company. Since founding the company in Canada in 2002, he has determined and continues to lead the overall strategy and direction of our global operations, building it into a \$5+ million enterprise with 34 employees in three countries. Mr. Larsen makes the ultimate determination on best methods to achieve company objectives. In addition to the executive discretion Mr. Larsen has over the organization's day-to-day operations, he also has supervisory authority over our high performance team. The above-summary clearly indicates that Mr. Larsen has executive authority to hire, fire, and direct the management team that reports to him, as well as his indirect reports.

ABILITY TO PAY WAGE

8 C.F.R. §204.5(g)(2) requires proof that a petitioner is able to pay the beneficiary's wage with respect to an I-140 petition filing. As of December 31, 2016, our U.S. revenues were more than \$2.8 million USD. Please refer to the enclosed U.S. tax return at the previous **Exhibit L**. Mr. Larsen will continue to receive his annual base salary of \$240,000.00. Given our current financial stability, we are able and will continue to pay this proffered wage.

LSS SOFTWARE HOLDINGS, INC. INTENDS TO CONTINUE TO EMPLOY MR. LARSEN

By virtue of submitting this Letter of Support, LSS Software Holdings, Inc. demonstrates its intent to continue to employ Mr. Larsen in an executive role with the U.S. company.

Mr. Larsen meets the requirements for an EB-1C Immigrant Visa

We would now like to secure immigrant status on behalf of Mr. Larsen that he may continue to execute his duties and responsibilities as the CEO of our company in the U.S. Mr. Larsen possesses executive skills and industry experience that are invaluable to our operations. Therefore, we respectfully request the approval of his application for immigrant status as a Multi-National Executive.

Should you require additional information or documentation, please contact us or our immigration counsel, Jennifer Behm, Esq., (716-634-1010) who filed a Notice of Appearance (Form G-28) in this case.

Very truly ours,

LSS Software Holdings, Inc.

Jim Schlegel

Vice President, Sales & Delivery

TABLE OF CONTENTS

EB-1C Immigrant Petition for Alien Worker (Form I-140) Filed Concurrently with Application to Adjust Status (Form I-485)

PETITIONER:

LSS Software Holdings, Inc.

BENEFICIARY: Mr. Bjorn LARSEN

Exhibit A: Beneficiary's Identity and Status Documents

Company Operations

Exhibit B: Consolidated Financial Statements for YE Dec 31, 2016

Exhibit C: Global Organizational Chart

Exhibit D: Website Background Information

(www.leanindustries.com)

Exhibit E: Corporate Brochure - AdjustmentHub™ software

Canadian Office (Lean Software Services, Inc.)

Exhibit F: Canadian Certificate of Incorporation

Exhibit G: Canadian Corporate Tax Return for YE Dec 31, 2016

Exhibit H: Google Maps: Office at 45B West Wilmot St, Suite 215,

Richmond Hill, Ontario, Canada

Exhibit I: Organizational Chart for Canadian team

Corporate Affiliation

Exhibit J: Stock certificate demonstrating Lean's 100% ownership of all 1,000 issued shares of LSS Software

U.S. Office (LSS Software Holdings, Inc.)

Exhibit K: Certificate of Incorporation and Certificate of Revival/Renewal

Exhibit L: Form 1120, Corporate Income Tax Return for the year ended 12/31/2016

Exhibit M: Google Maps confirmation and lease for our U.S. office located at 7915 Washington Wood Drive, Dayton, OH

Exhibit N: Organizational chart for U.S. team.

Beneficiary's Executive Role

***Refer to Organizational Charts Enclosed at Exhibit C, Exhibit I, and Exhibit N

Exhibit O: Selection of News Articles

Exhibit A

MENTIONS ET RESTRICTIONS Ce passeport est valable pour tous les pays, sauf indication contrains. Le titulaire doit se conformer aux formalités relatives aux vias acur aux autres formalités d'entrée des pays où il a l'intention de se rendre.

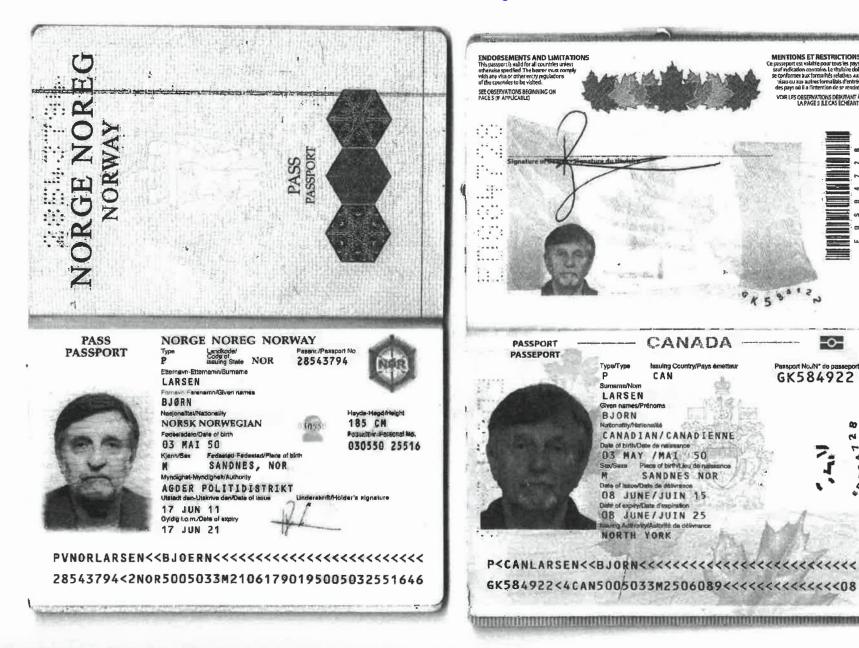
VOIR LES OBSERVATIONS DÉBUTANT À LA PAGE 5 (LE CAS ÉCHÉANT)

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3

Passport No./N° de passeport

GK584922



Most Recent I-94

Admission (I-94) Record Number: 22960500940

Most Recent Date of Entry: 2017 May 29

Class of Admission: L1

Admit Until Date: 07 / 20 / 2018

Details provided on the I-94 Information form:

Last/Surname:

LARSEN

First (Given) Name:

BJORN

Birth Date:

1950May03

Passport Number :
Country of Issuance ;

GK584922 Canada

Get Travel History

▶ Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

- if an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.
- Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

OMB No. 1651-0111 Expiration Date:05/51/2017

For inquiries or questions regarding your I-94, please click here

Accessibility Privacy Policy

The ability to create and pay for a Provisional I-94 will be disrupted during the times listed below. The options to view travel history or most recent I-94 will be available during this time.

X

🚳 Saturday, May 6, 2017 6:00pm - 12:00am (18:00 - 24:00) EDT



Most Recent I-94

Admission (I-94) Record Number: 35765657785

Most Recent Date of Entry: 2017 April 23

Class of Admission: L1

Admit Until Date: 07 / 20 / 2018

Details provided on the I-94 Information form:

Last/Surname:

LARSEN

First (Given) Name:

BJORN

Birth Date :

1950May03

Passport Number:

GK584922

Country of Issuance:

Canada

Get Travel History

▶ Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. Is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

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OMB No. 1651-0111

For inquiries or questions regarding your 1-94, please click here

Accessibility | Privacy Policy

Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 27 of 223 PAGEID #: 56

Department of Homeland Security
U.S. Citizenship and Immigration Services

Form I-797C, Notice of Action

THIS NOTICE DOES NOT GRANT ANY IMMIGRATION STATUS OR BENEFIT.

RECEIPT NUMBER EAC-15-217-50844		CASE TYPE 1129 PETITION FOR A NONIMMIGRANT WORKER
RECEIPT DATE August 3, 2015	PRIORITY DATE	PETITIONER LLS SOFTWARE HOLDINGS INC
NOTICE DATE August 7, 2015	PAGE 1 of 1	BENEFICIARY LARSEN, BJORN

JAMES G MEAGLEY
JAECKLE FLEISCHMANN & MUGEL LLP
AVANT BLDG STE 900
200 DELAWARE AVENUE
BUFFALO NY 14202-2107

Notice Type: Approval Notice

Class: L1A

Valid from 07/21/2015 to 07/20/2018

Consulate: POE: BUFFALO, NY

This notice is to advise you of action taken on this case. The official notice has been mailed according to the mailing preferences noted on the Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative. Any relevant documentation was mailed according to the specified mailing preferences.

This is to confirm the approval of the above petition. It was filed at the port of entry pursuant to the provisions of the North American Free Trade Agreement (NAFTA). The petition is valid for the period shown above.

This completes our action on this petition.

The lower portion of this notice should be shown at the port of entry whenever the named worker(s) wants to enter the U.S. in the classification above, during the period of validity of the petition.

Please read the back of this form carefully for more information. If you have any questions about tax withholding, please contact the Internal Revenue Service.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa, for admission to the United States, or for an extension, change, or adjustment of status.

This courtesy copy may not be used in lieu of official notification to demonstrate the filing or processing action taken on this case.

THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.

Number of workers: 1

Name LARSEN, BJORN DOB COB 05/03/1950 NORWAY Class Consulate / POE OCC

The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at www.ombudsman.sba.gov or phone 202-205-2417 or fax 202-481-5719.

NOTICE: Although this application/petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify the information submitted in this application, petition and/or supporting documentation to ensure conformity with applicable laws, rules, regulations, and other authorities. Methods used for verifying information may include, but are not limited to, the review of public information and records, contact by correspondence, the internet, or telephone, and site inspections of businesses and residences. Information obtained during the course of verification will be used to determine whether revocation, rescission, and/or removal proceedings are appropriate. Applicants, petitioners, and representatives of record will be provided an opportunity to address derogatory information before any formal proceeding is initiated.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

U.S. CITIZENSHIP & IMMIGRATION SVCS

VERMONT SERVICE CENTER
75 LOWER WELDEN STREET

SAINT ALBANS VT 05479-0001

Customer Service Telephone: (800) 375-5283



Department of Homeland Security U.S. Citizenship and Immigration Services

I-797B, Notice of Action

EAC-13-210-50717	A MONTH AND THE PARTY OF THE PA
RECEIPT DATE PRIORITY DATE July 25, 2013	LSS SOFTWARE HOLDINGS INC
August 6, 2013 PAGE 1 of 2	LARSEN, BJORN
dames g meagury Daeckle Fletschwann 4 musel ilp 200/ Delaware Avenue Avant Building Suite 800 Buffalo ny 14202-2107	Motice Type: Approval Notice Class: LiA Valid from 07/19/2013 to 07/18/2015
of the North American Free Trade Agreement (NAFTA). This completes our action on this petition.	po henevar the maned worker(a) wants to enter the petition.
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WARSEN, GJORN The Small Business Regulatory Enforcement and Falross Act ostabli med the Vaffice of the National Ombudaman [ONO] at the Small Business Administration. The QNO assists small businesses, with issues related to federal regulations If you are a small business with a dominent or complaint about regulatory enforcement, you may contact the ONO at wiw embudamen, sha gov or phone 202-205-2417 or fax 202-481-5719.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

05/03/1950 NORWAY

YERMONT SERVICE CENTER 75 LOWER WOLDEN STREET

SAINT, ALBANS V7 05479-0001 Cistoner Service Relephone: (800) 375-5283 Form 1797B (Rev. 10/31/05)N

Please tear off portion below and forward it to the alien worker

The alten may use this portion when applying for a visa at an American consulate abroad, or if no visa is required, when applying for admission to the U.S.

Receipt#: ERE-19-210-50717

Case Type: 1129 Petitioner: LSS SOFTWARE HOLDINGS INC

Notice Date: August 6, 2013

Betitioner Validity Dates: Valid from 07/19/2013 to 07/18/2015 Number of Workers: 1

DOB COB

Class Consulate / POE OCC

05/03/1950 NORWAY

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Department of Homeland Security.
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RECEIPT NUMBER EAC-12-210-50055	CASETYPE 1129 PETITION FOR A NONIMMIGRANT WORKE
RECEIPT DATE PRIORETY DATE	LSS SETTWARE HOLDINGS INC
August /6, /2012 PAGE 1 of 2	LARSEN, BJORN
JAMES 6 MEAGLEY DAECKLE FLEISCHMANN & MUGEL LLP AVANT/BUIDDING - SUITE 960 200 DELAWARE AVENUE BUFFALO NY 14202-2107	Notice Type: Approval Notice Class: LIA Valid from 07/17/2012 to 07/16/2013
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please contact the Internal Remonue Service.	information it you have any questions about tex withholding,
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Please see the additional information on the back. You will be notified separately about any other cases you filed.

OUS CITIZENSHIP & IMMIGRATION SVCS.

VERMONT SERVICE CENTER

75 LOWER WELDEN STREET

75 LOWER WELDEN STREET
SAINT ALBANS / VT 05479-0001
Customer Service Telephone: (800) 375-5283 /
Form 1797B (Rev. 10/31/05)N

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Petitioner: LSS SOFTWARE HOLDINGS INC

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Name DOB COB Class Consulate / POE OCC
LARSEN, BJORN 05/03/1950 NORMAY LIA PBB /010 Name



U.S. Customs and Border Protection Buffalo, NY Port# 10901

** Contact Number ** 716-843-8324 ** **

570- I-94 ArDep 555- I-129 Workr

\$6,00 \$325.00

TOTAL CASH

\$331.00

CLS CNT: 2

USER 321 5548

10:51AM 07/19/13

operator 0009-001



U.S. Customs and Border Protection Buffalo, NY Port# 10901

** Contact Number **
** 716-843-8324 ** *********

570- I-94 ArDep 555- I-129 Workr 566- Fraud/Det

\$6.00 \$325.00 \$500.00

TOTAL CASH

\$831.00 \$831.00

1-17-18

CLS CNT:

USER 321 5993

operator 9:37AM 07/17/12 0009-001

SILVERGATE TRANSLATIONS



TIFIED TRANSLATION



Translation Date May 24, 2017 Source Language Norwegian Birth Certificate of Bjørn Larsen I, Sandra Bird, hereby certify that the following is complete and accurate to the bjudgment and ability, and that I am competent in both the Norwegian and English larrender such translation. This translation certificate speaks only to the accuracy of the translation performed to does not speak to the original content of the source document(s).	CERTIFIED TRANSLATIC Translation Date May 24, 2017 35220067 Source Language Target Language English Description of Translated Document Birth Certificate of Bjørn Larsen I, Sandra Bird, hereby certify that the following is complete and accurate to the bjudgment and ability, and that I am competent in both the Norwegian and English larrender such translation. This translation certificate speaks only to the accuracy of the translation performed by the does not speak to the original content of the source document(s).	************		······	*******
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THE CHURCH OF NORWAY

Birth Certificate

For boy / girl	Last name Larsen
	First name
	Bjørn
Born	Date and year May 3, 1950 [illegible]
	in Sandnes
Christened	Date and year June 16, 1950
	in Høyland
Parents (in case the child was adopted, please state the	[Illegible] Torstein Hasbro Larsen
names of the adoptive parents):	and Kirsten Beate, née Øgland
The certificate is issued based on the church records of	Parish Høyland
	City/ Parish Sandnes

Sacristan's office

May 6, 1966

Andreas Hindal

[Signature]

Signature

[Initials]

Payment NOK 5.00

No payment

Form 4



Certified Silvergate Translation File Number 3522067 Page 2 of 2

Silvergate Translations = 2833 Smith Ave. Suite 222 • Baltimore, MD 21209

T:410,358.3588/F: 410.497.1121 • www.silvergatetranslations.com



	4
ORSKE KI	RKE Dåpsattest
For gutt / piles	fornavn Bibwii
Født	dato og år 3- predjenne; - 1950 -m. h. og femle Sam dres
Døpt	dato og år 16- sekertinde gil. s.a.
Foreidre (dersom vedk. er adoptert, skal adoptiv- foreidrene føres opp som foreidre)	gernalt. Forstein Karto Lorden og h. Kirsten Bezte 1. Galand
Attesten er utskrift av kirkeboka for	by/pressegletd Feinelnes
	embete, den 6-5 1966.
et lime betaling	underskrift,

Exhibit B

LEAN SOFTWARE SERVICES INC. & LSS SOFTWARE HOLDINGS INC.

CONSOLIDATED FINANCIAL STATEMENTS

DECEMBER 31, 2016 (Unaudited) Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 36 of 223 PAGEID #: 65

LEAN SOFTWARE SERVICES INC. & LSS SOFTWARE HOLDINGS INC.

CONSOLIDATED FINANCIAL STATEMENTS

December 31, 2016
(Unaudited)

CONTENTS

	Page
Notice to Reader	1
Consolidated Balance Sheet	2 - 3
Consolidated Statement of Retained Earnings	4
Consolidated Statement of Income	5

Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 37 of 223 PAGEID #: 66

NOTICE TO READER

On the basis of information provided by management, we have compiled the Consolidated Balance Sheet of Lean Software Services Inc. & LSS Software Holdings Inc. as at December 31, 2016 and the Consolidated Statements of Income and Retained Earnings for the year then ended.

We have not performed an audit or a review engagement in respect of these Consolidated financial statements and; accordingly, we express no assurance thereon.

Readers are cautioned that these statements may not be appropriate for their purposes.

Concord, Ontario April 10, 2017 CHARTERED ACCOUNTANTS LICENSED PUBLIC ACCOUNTANTS

CONSOLIDATED BALANCE SHEET DECEMBER 31, 2016 UNAUDITED - See Notice to Reader

	2016	2015
	\$	\$
ASSETS		
CURRENT		
Cash	3,121,300	941,926
Short term investments	300,000	700,000
Accounts receivable	674,402	554,247
Loans receivable	224,799	456,858
	4,320,501	2,653,031
EQUIPMENT, net of accumulated amortization of \$18,403		
(2015 - \$6,446)	78,307	38,258
INCORPORATION COSTS	2,640	2,640
SOFTWARE DEVELOPMENT	974,978	1,722,978
et total		
	5,376,426	4,416,907

CONSOLIDATED BALANCE SHEET DECEMBER 31, 2016

UNAUDITED - See Notice to Reader

1	2016	2015
	\$	\$
LIAE	BILITIES	
CURRENT .	1	
Accounts payable Income taxes payable Loan payable Deferred revenue	138,717 73,143 46,916 708,358	56,302 51,433 46,918 657,510 812,163
SHAREHOL	DERS' EQUITY	
STATED CAPITAL	745,000	745,000
RETAINED EARNINGS	3.664,292	2,859,744
	4,409,292	3,604,744
V-	5,376,426	4,416,907

PPROVED ON BEHALF OF T	THE BOARD:
	Director
	Director

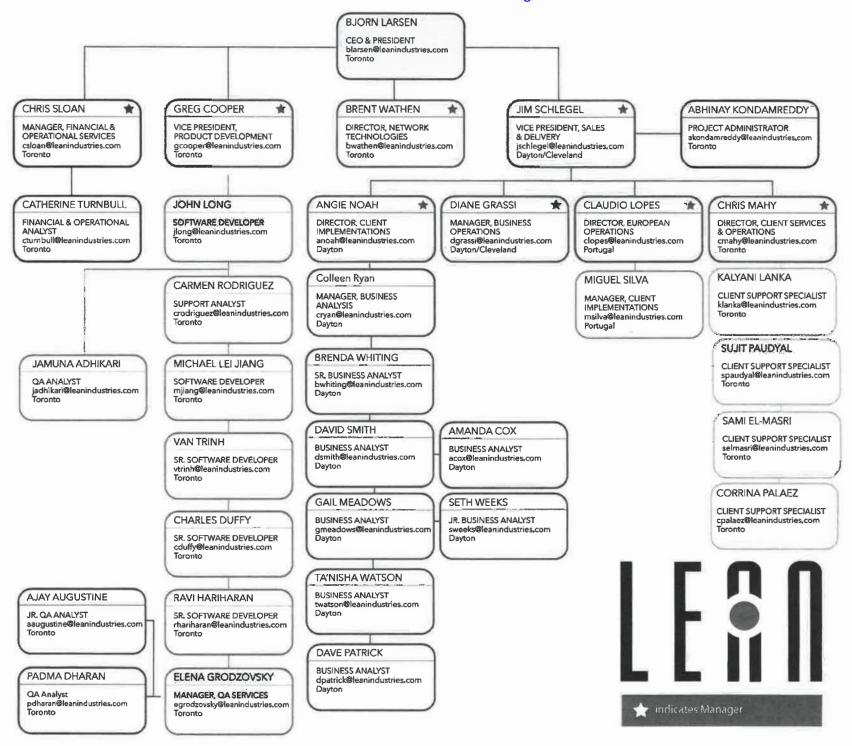
CONSOLIDATED STATEMENT OF RETAINED EARNINGS YEAR ENDED DECEMBER 31, 2016 UNAUDITED - See Notice to Reader

	2016	2015
	\$	\$
Retained earnings, beginning of year	2,859,744	2,429,587
Net income	804,548	430,157
Retained earnings, end of year	3,664,292	2,859,744

CONSOLIDATED STATEMENT OF INCOME YEAR ENDED DECEMBER 31, 2016 UNAUDITED - See Notice to Reader

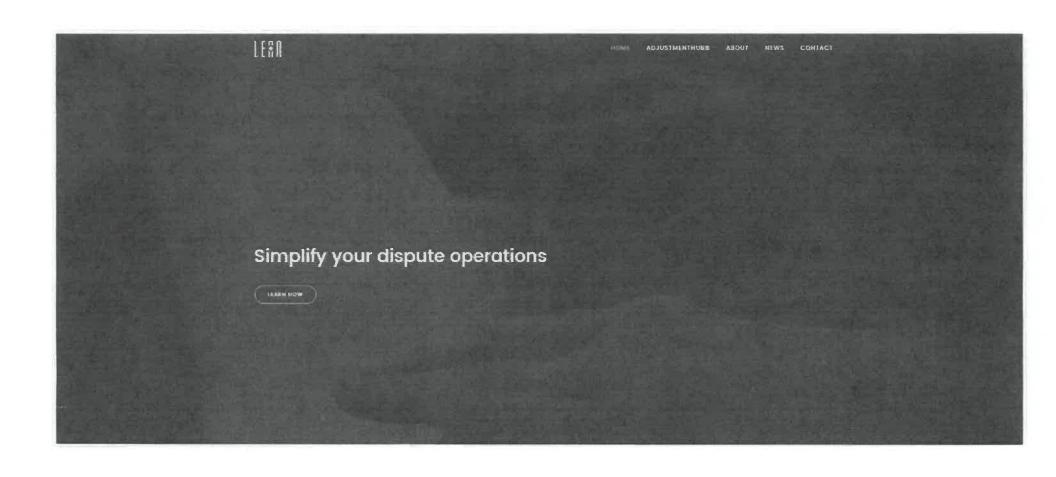
	2016	2015
	\$	\$
REVENUE		
Sales	5,533,903	3,003,646
EXPENSES		2
Advertising and promotion	52,116	12,659
Amortization	11,957	1,720
Bad debts	58,774	98,688
Commissions	39,744	46
Consulting	894,777	893,519
Insurance	62,166	26,707
Office and general	126,504	77,351
Professional fees	273,867	87,579
Rent	114,082	65,780
Software expense	748,000	230,000
Telephone	15,333	18,961
Travel	121,612	80,380
Unrealized foreign exchange loss (gain)	128,225	(141,380)
Wages and benefits	2,009,055	1,070,092
	4,656,212	2,522,056
INCOME before income taxes	877,691	481,590
Income taxes	73,143	51,433
NET INCOME	804,548	430,157

Exhibit C



Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 44 of 223 PAGEID #: 73

Exhibit D





miegration with crocks enterprise payment appropriation; and institution of large, our southern will cake efforties by the models expectably the extensive process extensive; or institution of contracting the contraction of Access on any online software software software the course manual and twee the efficiency with which you main all manuals from Whitney you are a

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fou don't have to take our word for the her to the fresh of the would be happy to take don't while us anow and we'll but you in touch





New industry regulations, innovative payment products, and platforms for dispute processing amplify the challenges you face as you reorganize your operations. Take for example, EMV liability shift, Apple Pay and Visa Claims Resolution (VCR) – each introduces complexities as you attempt to automate your dispute or claims management process.

AdjustmentHub can help you standardize the way you initiate, receive and process any disputed transaction. What this means for you is simplicity in overseeing your disputes operation in its entirety – we standardize processes, customer engagement, risk analysis, the management of regulation and compliance, and above all ease cost management. We offer our product to any financial institution in need of a solution to manage disputes for credit, debit, and prepaid cards, as well as ATM, POS, ACH, Bill Pay and Wile transactions.

Issuer

Create a case, analyze it, take action, close case, Seems simple enough, out with numerous product types, various requirements concerning cardioider correspondence, networks (schemes), organizational processes, and regulation compliance – things get complicated, expensive, and hard to measure.

LEARN MORE

Acquirer

Handagig disputer to your merchants from a multivide in reforming from merchants to provide date in answerding promine the complexity of an execution of the instructions that and the complexity of an execution of the instruction and the complexity of anterescent of the analysis of the many of

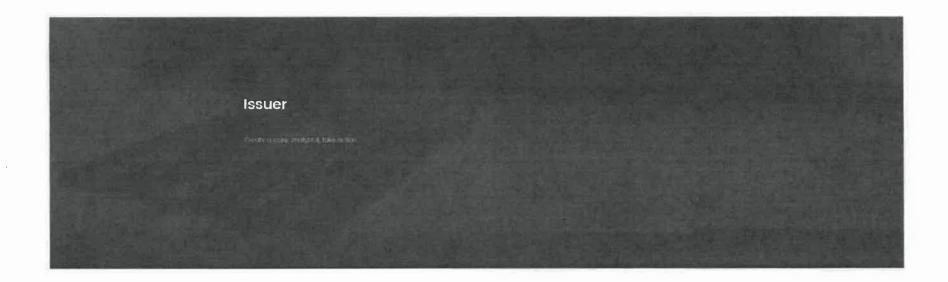
LEARN MORE

LEARIS MORE

Processor **

A connegat challenge laces by processors is the comben by that arises from very cing a bushlar or multi-testam work stream tot door issues and acquired about somificant challenges for teams, especially when builtageing the hundroup detwork interactions and possible methaling to terminal order distences Adjustment or the value and streams and possible methalism or terminal order distences Adjustment or the value and streams operations, adjustment in process of handing disputes in a phocess or handing disputes in a processor environment.

If you would like to learn more about us and our products, contact Jim on our relationship team.



initiate cases from anywhere

Our case creation portal supported by Bertille AFE. enables Adjustmentinuo to serve your card) piders front any channel – mobile banking omme banking, carrownters, and pranches. Click here to learn more our robust case intake process

Digitize customer engagement

Send person il experimenter march into race records automatically Magic Adjusts enthus enables source imprement a completely paperieds Joeration Click here to really more about dow will niekwo, nomer communication albein etc. Automated - citien unconnected systems

Manage all types of disputes

Specialized workflows enable disputes on debit cards creat cards prepaid cards ATM, ACH, check where or payments and any other payment products you may offer Click here to learn more shout how we manage air your unique dispute types through a angle application

Eliminate legacy systems

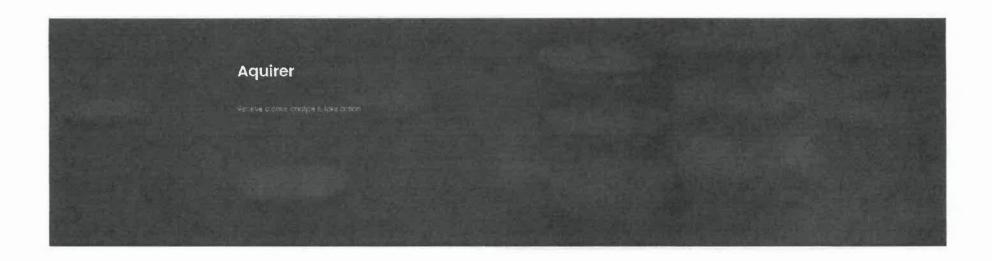
An, it mentious allows you to constructor all dispute manager end solving Mold single clattern. This allows you to of lize a single platform to manage the writing intercools of a dispute number than various aging.

Integrate with payment networks

Our payme to network interfaces allow you to exchange dispute data automatically rather than through manual user actions. Our library of interfaces support protocous to: Visa, MasterCard, STAR, NYCE, FULSE, and others, Click here to learn about our expertise integrating with various phythern

Visualize your data and risk

synansimy exposure at any given time? Am liabhening to regulatory compliance deadlines? What it the quarter? Answer these disestions and many offers were our reporting plantners.



Auto case creation

Charge Date - ethine a recuest, and about the Overthors from any reporate ges reasily queurs with the appropriate records date and documents into adjustmente at

Integrate with payment networks

Que payment network interfaces allow your to extremize distant date of underlays after their three-interfaces are distant after all references papers protocous for vite treaterists of the INTEL papers protocous for vite treaterists of the INTEL support protocous for vite treaterists.

Merchant / ISO Portal

Ofer a potter for your medicants and (SO) to dwoley and easily approxical dispute specing documents such as receipts. ATTV administ, and merchant poyces to contest charge-back, and fluiffill activities requests in adolesm, the doctal elevan merchants and (SO) to impose opportunities.

Painless Merchant / ISO correspondence

stop scanning the same documents with shoot's set ere it leaves and a labert. Story leave temphates in Adjustmentage and jatach to cases as general.

Take advantage of your data

Adjustmenth-Lb will gather and display data decessary to make them (automatically or martially) - data about the displayer transaction, branching is SC and network specific details.

Visualize your data and risk

How many charge bases of diverselections of the design which are not seen to the design of the desig



Multi-tenant support

Whether you are an organization that processes transactions for issues, acquirers, or mechants of different sizes and shapes. Adjustment-lub can accommodate you Due to the floodie nature of our case management engine, Adjustment-lub tar, adapt to processing environments with a diverse cat of requirements. Our most notable implementation with a processor of a payments company that supplies the dispute processing services for 32 banks in Portugat.

Integrate with payment networks

Our payment network interfaces allow you to exchange dispute data automatically rather than through manual user actions. Our screap or interfaces support protocol for vise, MasterCare, STAR, NYCE, PULSE, und others. Click here to learn about our expense integrating with various payment networks.

Cilent Portals

Offer a ponel for your card issuing and merchant acquiring clients that a laws themsto quickly and easily submit and respond to case data. Access to Adjustmentinuo can be extended to your clients in a way that provides men with a consistent also effective way to manage their dispute cases — including sending and receiving chargebacks processing adjustments to cardinolders or merchants, and exchanging electronic documentation.

Painless communication with clients

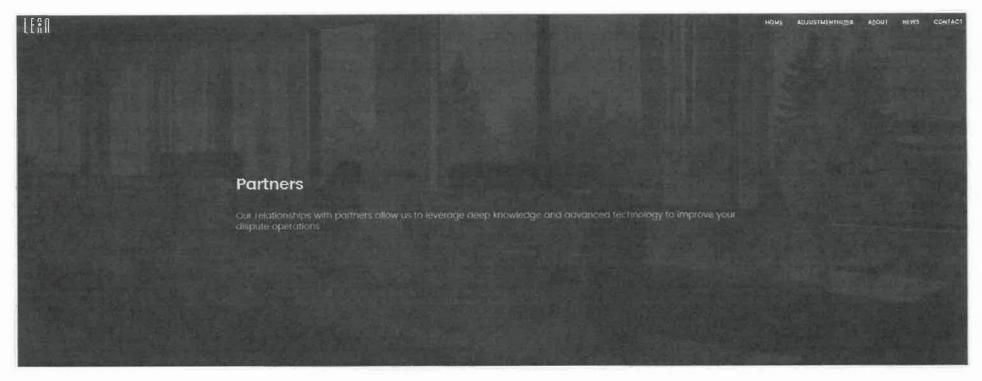
Stop printing fetters manually, scanning paper occuments, or uploading them to different systems each time a document needs to be included with a case record. Store all of your clients feather templates in AdjustmentHub and create and send correspondence to cardhorders or merchands on the feet.

Take advantage of all your data

AdjustmentHub will gather and display Data to assist issuers and accuracts in making correct and trially decisions about a dispute. The practorin yield aggregate and combile data about the frequention the reason for the dispute, the cardinalder and merchant in quastion, and the payment network that processed the transaction.

Visualize your data and risk

How many chargebacks did we manage this day week, month? What's our average case resolution time? Which transactions are being disputed the most! Which disputes are we winning or losing? Which merchants are attracting the most disputes? Active these questions and many others with our reporting distrorm.





ethoca



News - Lean Industries

Page 1 of 4

News

What we're up to at Lean Industries

April 4, 2017

Lean User Group 2017

□ 0 Comments ② 2 Minutes

October 25, 2016

Ethoca & Lean Industries form strategic partnership

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C 0 Comments 0 6 Minutes July 17, 2016 An in-depth look at cardholder communication C 0 Comments 2 2 Minutes July 17, 2016 with payment networks Integrating processors to automate the chargeback lifecycle C 0 Comments 0 1 Minutes July 17, 2016 An in-depth look at system integration for issuers July 17, 2016 Utilize specialized workflows to manage all types of disputes. July 17, 2016 Omni-channel Case Creation at a Top 10 issuing bank in the U.S. O Comments 0 1 Minutes

June 16, 2016

White Paper: Are you a payments processor?

D Comments 5 3 Minutes

December 1, 2015

Verifi & Lean Industries launch first joint major issuing bank

□ 0 Comments ◎ 6 Minutes

January 5, 2015

EMV in the US: Are You Ready?

□ 0 Comments □ 1 Minutes

November 22, 2014

Lean Industries opens office in Dayton, Ohio

October 23, 2014

White Paper: Consumer "self-service" disputes management

O Comments 0 2 Minutes

May 5, 2014

Verifi & Lean Industries Announce Partnership

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C 6 Comments 6 4 Minutes July 3, 2013 White Paper: Complex Banking Environments May 23, 2013 Case Study: Operational Excellence at Woodforest National Bank O Comments 0 2 Minutes LOADING_ ABOUT NEW5 CONTACT JOBS PARTNERS

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ADJUSTMENTHUR®

ISSUER

ACQUIRER

PROCESSOR

LEAN USER GROUP 2017

APRIL 4, 2017 | IN BLOG | BY JIM SCHLEGEL

We are pleased to announce that our Lean User Group (LUG) meeting will be held on October 1-3 in Charleston, South Carolina at the Charleston Hyatt Place.

This open and collaborative forum is focused exclusively on *how companies can continuously adapt and improve the management of disputes and exceptions* – particularly in light of major changes in regulations and compliance – including Visa Claims Resolution (VCR), and the emergence of new payment technologies.

During this year's event, we will showcase new business features and technical characteristics of the latest releases of AdjustmentHub™. We will showcase key enhancements to the software and demonstrate how these can allow all users to become more compliant, productive and efficient. We will also solicit your input and guidance on our roadmap for the future of our product.

As a current user, prospective user of AdjustmentHub[™] or Lean partner, you will have the opportunity to engage in discussions with your industry peers and current users about market trends in retail payments that are having significant effects on issuing banks, acquirers, processors and payment networks. Participation in this forum will be of great value to you in several ways:

HOME ADJUSTMENTH

Understand Lean Industries' product development roadmap for future releases of AdjustmentHub™
Discover and adopt best practices for dispute processing that you can deploy within your own organization
Build relationships and network with your peers and partners in the industry

We will be hosting a reception on the evening of Sunday, October 1, and conducting sessions all day on Monday, October 2 and on the morning of Tuesday, October 3. Please contact us at usergrp@leanindustries.com to register for the event. We kindly ask that you complete your registration, which is required to attend the conference, by July 31, 2017.

We look forward to your participation with us at the 2017 LUG conference.

Sincerely,

The Lean team.

ADJUSTMENTHUS® ABOUT
ISSUER JOBS
ACQUIRER PARTNERS
PROCESSOR

CONTACT

Copyright © 2016 Lean Industries, All rights reserved,

NEWS

FORM STRATEGIC PARTNERSHIP

OCTOBER 25, 2016 | IN BLOG, PARTNERS | BY SUPPORT@LEANINDUSTRIES.COM

TORONTO, Ontario, Canada; Austin, TX; and London, UK – October 3, 2016 – Ethoca, the industry standard for collaboration-based technology solutions that enable card issuers and online merchants to increase card acceptance and stop ecommerce fraud and disputes, today announced a partnership with Lean Industries, a leading provider of dispute management software solutions. Now any card issuing bank using Lean's AdjustmentHub™ dispute processing platform will be able to automatically connect to Ethoca's Global Collaboration Network to easily resolve fraud and customer disputes – avoiding the costly and labor intensive chargeback process entirely.

With customer experience and maintaining top position in the cardholder's wallet as chief concerns, card issuers also struggle to cope with the increasing volume of costly fraud claims and dispute cases that put additional pressure on operating margins. Ethoca's flagship service – Ethoca Alerts – solves this problem by giving merchants an early warning on customer disputes and fraudulent transactions that have already been confirmed by the bank

with their cardholders. Merchants act on alerts immediately by stopping the fulfilment of fraudulent orders and issuing cardholders a refund to avoid the costly chargeback process. This in turn enables card issuers to eliminate operational costs associated with chargebacks and speeds the recovery of dispute and fraud losses, while ensuring a better experience for cardholders

To increase the level of automation and speed of resolution for disputed transactions, AdjustmentHub will send disputed transaction data to Ethoca in near real time. After Ethoca's merchant customers resolve the cardholder's reason for dispute by issuing a refund, Ethoca Alerts sends the response back to AdjustmentHub, where the open dispute case will be updated to reflect the successful outcome of the issuer-merchant collaboration. This seamless, end-to-end process ensures no chargeback will be processed. AdjustmentHub from Lean Industries is used to manage tens of thousands of disputes each month across its issuing customer base and the integration with Ethoca Alerts is available for issuing customers worldwide,

"We make participation in the Ethoca Network virtually effortless for our card issuer customers – with no added IT burden or heavy integration required to start seeing value day one," said Trevor Clarke, Co-Founder and EVP, Issuer Relations at Ethoca. Through our integration with AdjustmentHub, card issuers can make their entire fraud and dispute recovery process faster, easler, more accurate and more cost-effective, while creating a vastly improved experience for cardholders. Card issuers can also recover a wider range of disputed transactions, including low value and 3DS purchases that are typically non-recoverable."

"We share a common mission with Ethoca: our companies seek to provide faster, lower-cost dispute resolution and fraud mitigation services for the card issuing community," said Lean Industries Chief Executive Officer, Bjorn Larsen. "Together, Lean Industries and Ethoca will increase the level of interaction between card issuers and merchants, empowering both parties to reduce the impact of costly and lengthy fraud and dispute handling processes."

Ethoca's global network is growing quickly around the world and includes the largest merchant and card issuer footprint in the industry. Merchant coverage includes seven of the top ten ecommerce merchants, the world's largest digital goods brands, and more than 137,000 enrolled merchant descriptors. More merchant participation drives dramatically higher fraud and dispute related recoveries for Ethoca's card issuer customers, now numbering more than 555 worldwide, These include 14 of the top 20 North American card issuers (including three of the top four in the U,S.), 21 in EMEA (including nine in the UK), nine in Canada, two of the top four in Australia, and more. Ethoca's Global Network now spans more than 37 countries.

About Ethoca

Ethoca is the leading, global provider of collaboration-based technology that enables card issuers, ecommerce merchants and online businesses to increase card acceptance, stop more fraud, recover lost revenue and eliminate chargebacks from both fraud and customer service disputes. Through the Ethoca Network – the first and only of its kind in the industry – we are closing the information gap between card issuers and merchants. This unique capability makes fraud and customer dispute insight available and actionable in real time. Our suite of services delivers significant revenue growth and cost saving opportunities to our card issuer and merchant customers around the world. Seven of the top ten ecommerce brands, 14 of the top North American card issuers,

two of the top five UK card issuers and more than 4,700 ecommerce businesses around the world rely on Ethoca solutions and the network that powers them. To find out more, please visit us online at www.ethoca.com.

HOME ADJUSTMENTH

About Lean Industries

Lean Industries develops and delivers software solutions designed to lower the costs and improve the quality of managing disputes, exceptions and adjustments for electronic payment transactions. Our solutions enable organizations of all types and sizes to become highly efficient and productive through extensive process automation, elimination of paper-based practices, and integration with critical enterprise payment applications. Our people are experts in this field and provide implementation, training and customization services to match your company's needs. For more information, visit: www.leanindustries.com.

ADJUSTMENTHUB[®] ABOUT NEWS CONTACT

ISSUER JOBS

ACQUIRER PARTNERS

PROCESSOR

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Exhibit E



www.leanindustries.com

Lean's AdjustmentHub™ exception handling capabilities save you time and money

AdjustmentHub™ CLAIMS/Manager and IMAGE/Manager solutions for Issuers, Acquirers and Processors automate exception handling workflows and manage claims from Entry, Review and Chargeback, to Representment and Arbitration.

AdjustmentHub™ operates in all environments: Debit and Credit, PIN and Signature, ATM, POS, ACH, BillPay and eCommerce online transactions and exception situations, managing both UsOnUs and network-switched claims.

This lets you:

- Eliminate unnecessary write-offs
- Reduce dispute processing costs
- Increase processing volumes in a low-growth staffing structure
- Better manage fraud and other risks
- Cross-train staff and eliminate network-dependent expertise levels
- Extend dispute processing entry and review to outside customers and even cardholders with Internet access

LFAN

AdjustmentHub™ integrates all of your exception handling and dispute processing needs into one cohesive system, reducing cost of processing and improving customer service through a single system interface

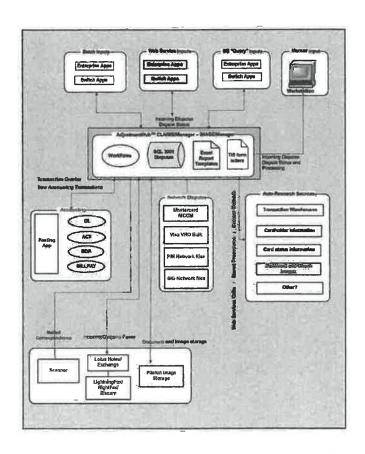
The AdjustmentHub™ product family from Lean Industries is designed to solve the needs of financial institutions in dealing with cardholder and merchant disputes. Two separate yet integrated subsystems - CLAIMS/Manager and IMAGE/ Manager - deliver comprehensive functionality to financial institutions, merchants and third-party processors, for UsOnUs and network-related claims.

Typically, dispute processing handles transaction claims and reversals initiated by cardholder complaints. These claims must be handled with appropriate procedures and steps, to ensure that the cardholder is treated in accordance with regulatory laws and internal/external rules.

High fees, complex rules, costly personnel and extensive write-offs make this a resource-consuming process. With ever-growing claims volumes, dispute analysts can have a substantial impact on customer satisfaction levels and transaction write-offs.

In addition to high staffing levels and high operating costs, financial institutions continue to record millions of dollars in annual write-offs.

Analysts commonly handle hundreds of open claims, putting enormous pressure on timeliness and productivity.



AdjustmentHub™ handles all aspects of dispute processing, for all of your payment products, in every issuing card and merchant acquiring environment. Using automated workflow processes the system will:

- Reduce costs and allow for significant claims volume increases
- Eliminate lost claims due to oversights and errors
- ✓ Minimize financial write-offs

Dispute Processing Workflows

Dispute processing is driven by rules - Reg E and Reg Z government rules, Visa and Mastercard network rules, and internal performance-level rules. CLAIMS/Manager operates on the basis of these rules. Externally defined, they govern chargeback and adjustment rights, document requirements, reason codes, processing fees and timers, and workflow steps. The rules reside in CLAIMS/ Manager's database and can be adjusted as requirements vary. Analysts need no longer remember the various nuances in each set of network operating regulations - rights are automatically determined and timers automatically escalate when necessary. Reason codes are

segmented by network and claim type, minimizing the risk of picking the wrong one and CLAIMS/ Manager's intelligent timers with early-warning alarms can be configured to ensure that deadlines are always met.

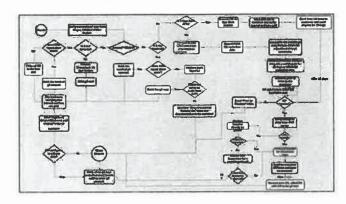


Image and Forms Processing

IMAGE/Manager eliminates paper and manual fax handling, manipulating cardholder claims letters and chargeback documentation as digital images. Images are seamlessly integrated into the dispute workflow, stored in case item "folders". Analysts can receive, view, print and transmit images to networks and cardholders using standard browser

screens, in the context of specific disputes. Interfaces exist to fax servers and scanners as well as Mastercard's MCOM and VISA's VRO Bulk image exchange systems. IMAGE/Manager handles all document types, including draft fulfillments, chargeback and representments, and customer claims and response letters.

Transaction Warehouses and Network Access

Dispute processing requires validation of the original cardholder transaction. AdjustmentHub™ references these transaction warehouses using standard database channels. If warehouses are unavailable then Lean Industries' experts can assist in getting them built, using interfaces to

transaction platforms such as Postilion Office and ACI Base24. AdjustmentHub™ processes network raw data files and constructs network transactions and adjustments using existing switch interfaces to Postilion and Base24.

Financial Transactions

AdjustmentHub™ workflows and analyst decisioning tools create appropriate financial transactions to effect cardholder debits and credits. These transactions can be formatted as database records, XML data streams or formatted

files and transmitted to enterprise settlement systems. Alternatively, AdjustmentHub™ can post to existing G/L and DDA accounts using available posting applications.

User Interfaces and Work Distribution

AdjustmentHub™ utilizes browser-based client interfaces, providing the claims analyst with comprehensive analytical and integrated tools. Information for managing disputes, such as transactions, adjustments, claims and images are presented on easily understood forms and panels. Dynamic analyst queues

manage workloads from pre-defined business criteria such as issuer/acquirer, network, PIN or Signature, claim amount levels and dispute types. Facilities exist to manage queues, workloads and analyst groups. Analysts can own claims or work from pools of claims.

Feature

Benefit

Dynamic workflows based on card products, network, issuer/acquirer and other factors

Automated capture and manipulation of images from network imaging systems and digital fax servers and scanners

Automated case open, tracking and matching

Automated processing of incoming and outgoing network adjustments

Extensive user analyst and call center facilities, including contextual questionnaires

Flexible analyst queuing system with multi-factored queues and pooling or personal ownership of cases

Full knowledge of internal and network processing rules, coupled with intelligent escalators and alarms

Comprehensive reporting system with automatic scheduling, formatting and distribution of reports and data extracts

Reduces the dependency on case-specific knowledge resident with key personnel. Dispute processing tasks can be moved to any location with workstation access

Significant people and time savings, timely response to document submission deadlines, with offline image storage replacing archived paper copies

Reduces personnel workloads and allows for significant increase in case volumes with no increase in staffing levels

Eliminates paper report handling and ensures timely processing of adjustments

Ensures that appropriate cardholder questions are asked and answered and that accurate reason codes are selected

Enables flexible work rules based on management's varying needs

Reduces dependencies on analyst expertise and ensures that cases are actively tracked and deadlines are met, resulting in fewer write-offs and lost claims

Easy access to information for all levels of executive and claims management personnel



E-mail: marketing@leanindustries.com www.leanindustries.com

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Exhibit F

ROSENEERG SMITE & PINKS 01/30/02 12:39 FAX 905 660 3064 M 003 . Ontario Corporation Number For Ministry Use Only Numero de la exolite en Ontario 151211 JANUARY 23 JANVIER, 2015 ARTICLES OF INCORPORATION STATUTS CONSTITUTE'S 2. The address of the registered office in: Adresse du siège social: 200-2000 STEELES AVENUE VEST L4K3K9 CONCORD. unio of Municipality or Post Office) Number (or minimum and maximum in number) of the choice is: Nombre (où nombres mirimal of madmal) d'administratours A MINIMUM OF ONE AND A MAXIMUM OF ELEVEN. 4. The first director(s) is/are: Premier(s) administrateur(s); eldent Canadia de Yen er No Plant peine, kritiste and exmand Priston, kritiste et non de part BJORN LARSEN 27 JOSEPH AARON BLVD. YES THORNHILL, ONT. L4J 6J3

Exhibit G

LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:34 AM

Canada Rever

Agence du revenu du Canada

T2 Corporation Income Tax Return

Code 1601
Protected B
when completed

This form serves as a federal, provincial, and territorial corporation income tax return, unless the corporation is located in Quebec or Alberta. If the corporation is located in one of these provinces, you have to file a separate provincial corporation return.

All legislative references on this return are to the federal *Income Tax Act* and *Income Tax Regulations*. This return may contain changes that had not yet become law at the time of publication.

Send one completed copy of this return, including schedules and the General Index of Financial Information (GIFI), to your tax centre or tax services office. You have to file the return within six months after the end of the corporation's tax year.

For more information see <u>cra.gc.ca</u> or Guide T4012, T2 Corporation - Income Tax Guide.

055	Do not use this area	
	*	

Business number (BN) 001 8 15 1	8 (4 (7 (8 (5) 3 (n) R) C) () () () ()		
Corporation's name	To which tax year does this return apply?		
002 LEAN SOFTWARE SERVICES, INC.	Tax year start Year Month Day Year Month Day 2016/01/01 061 2016/12/31		
Address of head office Has this address changed since the last time we were notified?	Has there been an acquisition of control resulting in the application of subsection 249(4) since the tax year start on line 060?		
Unit 24 City Province, territory, or state	If yes, provide the date control was acquired		
O15 Richmond Hill O16 ON Country (other than Canada) Postal code/Zip code O17 O18 L4C 5H1	Is the date on line 061 a deemed tax year-end according to subsection 249(3.1)?		
Mailing address (if different from head office address) Has this address changed since the last time we were notified? 2 No X	Is the corporation a professional corporation that is a member of a partnership?		
last time we were notified?	Is this the first year of filing after: Incorporation?		
023 Unit 24			
City Province, territory, or state O25 Richmond Hill O26 ON Country (other than Canada) Postal code/Zip code	Has there been a wind-up of a subsidiary under section 88 during the current tax year?		
027 028 L4C 5H1 Location of books and records (if different from head office address)	Is this the final tax year before amalgamation?		
Has this address changed since the last time we were notified?	Is this the final return up to dissolution?		
(If yes, complete lines 031 to 038.) 11 Plaisance Road	If an election was made under section 261, state the functional currency used		
032 Unit 24 City Province, territory, or state 035 Richmond Hill 036 ON Country (other than Canada) Postal code/Zip code	Is the corporation a resident of Canada? 080 1 Yes X 2 No If no, give the country of residence on line 081 and complete and attach Schedule 97.		
038 L4C 5H1 040 Type of corporation at the end of the tax year 1 X Canadian-controlled private corporation (CCPC) 4 Corporation public corporation	Is the non-resident corporation claiming an exemption under an income tax treaty?		
2 Other private corporation 5 Other corporation (specify, below)	If the corporation is exempt from tax under section 149, tick one of the following boxes:		
3 Public corporation If the type of corporation changed during the tax year, provide the effective date of the change	Exempt under paragraph 149(1)(e) or (l) Exempt under paragraph 149(1)(j) Exempt under paragraph 149(1)(t) Exempt under paragraph 149(1)(t)		
Lacing tailed only paragraphs of documents			
095 096	t use this area		
033	030		

Canadä

LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:34 AM

AttachmentsPro	tected	B who	en completed
Financial statement information: Use GIFI schedules 100, 125, and 141.			
Schedules - Answer the following questions. For each yes response, attach the schedule to the T2 return, unless otherwise instruc-	ed.	Yes	Schedule
Is the corporation related to any other corporations?	150		9
Is the corporation an associated CCPC?	160		23
Is the corporation an associated CCPC that is claiming the expenditure limit?	161	Ш	49
Does the corporation have any non-resident shareholders who own voting shares?	151		19
Has the corporation had any transactions, including section 85 transfers, with its shareholders, officers, or employees,	-		
other than transactions in the ordinary course of business? Exclude non-arm's length transactions with non-residents,	162		11
If you answered yes to the above question, and the transaction was between corporations not dealing at arm's length, were all or substantially all of the assets of the transferor disposed of to the transferee?	163	П	44
Has the corporation paid any royalties, management fees, or other similar payments to residents of Canada?	164	Н	14
Is the corporation claiming a deduction for payments to a type of employee benefit plan?	165	П	15
Is the corporation claiming a loss or deduction from a tax shelter?	166		T5004
Is the corporation a member of a partnership for which a partnership account number has been assigned?	167		T5013
Did the corporation, a foreign affiliate controlled by the corporation, or any other corporation or trust that did not deal at arm's length			
with the corporation have a beneficial interest in a non-resident discretionary trust (without reference to section 94)?	168	Н	22
Dld the corporation own any shares in one or more foreign affiliates in the tax year?	169		25
Has the corporation made any payments to non-residents of Canada under subsections 202(1) and/or 105(1) of the Income Tax Regulations?	170		29
Did the corporation have a total amount over \$1 million of reportable transactions with non-arm's length non-residents?	171		T106
For private corporations: Does the corporation have any shareholders who own 10% or more of the corporation's common		بب	
and/or preferred shares?	173	X	50
Has the corporation made payments to, or received amounts from, a retirement compensation plan arrangement during the year?	172	Ш	-
Does the corporation earn income from one or more Internet webpages or websites?	180		88
Is the net income/loss shown on the financial statements different from the net income/loss for income tax purposes?	201	X	1
Has the corporation made any charitable donations; gifts of cultural or ecological property; or gifts of medicine?	202	Н	2
Has the corporation received any dividends or paid any taxable dividends for purposes of the dividend refund?	203	Н	3
Is the corporation claiming any type of losses?	204	Ш	4
Is the corporation claiming a provincial or territorial tax credit or does it have a	205	X	5
permanent establishment in more than one jurisdiction?	206	H	6
Has the corporation realized any capital gains or incurred any capital losses during the tax year?	-	لــا	-
on line 320 of the T2 return), b) a partnership, c) a foreign business, or d) a personal services business; or			
ii) does the corporation have aggregate investment income at line 440?	207	M	7
Does the corporation have any property that is eligible for capital cost allowance?	208	X	8
Does the corporation have any property that is eligible capital property?		X	10
Does the corporation have any resource-related deductions?		Н	12
Is the corporation claiming deductible reserves (other than transitional reserves under section 34.2)?	0.40	Н	13 16
Is the corporation claiming a patronage dividend deduction?	216	Н	17
Is the corporation a credit union claiming a deduction for allocations in proportion to borrowing or an additional deduction?	218	Н	18
Is the corporation an investment corporation or a mutual fund corporation?	220	Н	20
Is the corporation carrying on business in Canada as a non-resident corporation?	221	Н	21
Is the corporation claiming any federal, provincial, or territorial foreign tax credits, or any federal logging tax credits?	227	Н	27
Is the corporation claiming an investment tax credit?	231	Н	31
Is the corporation claiming an investment tax deutific. Is the corporation claiming any scientific research and experimental development (SR&ED) expenditures?	232	H	T661
Is the total taxable capital employed in Canada of the corporation and its related corporations over \$10,000,000?	233	П	33/34/35
Is the total taxable capital employed in Canada of the corporation and its associated corporations over \$10,000,000?	234		
Is the corporation claiming a surtax credit?	237		37
Is the corporation subject to gross Part VI tax on capital of financial institutions?	238		38
Is the corporation claiming a Part I tax credit?	242		42
Is the corporation subject to Part IV.1 tax on dividends received on taxable preferred shares or Part VI.1 tax on dividends paid?	243	Ш	43
Is the corporation agreeing to a transfer of the liability for Part VI.1 tax?	244		45
Is the corporation subject to Part II - Tobacco Manufacturers' surtax?	249		46
For financial institutions: Is the corporation a member of a related group of financial institutions	250		20
with one or more members subject to gross Part VI tax?	250 253	H	39 T1131
Is the corporation claiming a Canadian film or video production tax credit refund?	254	Н	T1177
Is the corporation claiming a film or video production services tax credit refund?	255	\vdash	92
Is the corporation subject to Part XIII.1 tax? (Show your calculations on a sheet that you identify as Schedule 92.)	200		

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 13:11:34 AM

Attachments (continued) — Protected B when complete
Did the corporation have any foreign affiliates in the tax year?
Did the corporation own or hold specified foreign property where the total cost amount of all such property, at any time in the year.
was more than CAN\$100,000?
One the corporation transfer or loan property to a non-resident trust?
Did the corporation receive a distribution from or was it indebted to a non-resident trust in the year? Has the corporation entered into an agreement to allocate assistance for SR&ED carried out in Canada? T1142 T1145
Has the corporation entered into an agreement to transfer qualified expenditures incurred in respect of SR&ED contracts?
Has the corporation entered into an agreement with other associated corporations for salary or wages of
specified employees for SR&ED?
Did the corporation pay taxable dividends (other than capital gains dividends) in the tax year?
Has the corporation made an election under subsection og(11) not to be a CCPC?
That the composation revoked any previous election made under subsection 65(11)?
Did the corporation (CCPC or deposit insurance corporation (DIC)) pay eligible dividends, or did its general rate income pool (GRIP) change in the tax year?
Did the corporation (other than a CCPC or DIC) pay eligible dividends, or did its low rate income pool (LRIP) change in the tax year?
Did the corporation use the International Financial Reporting Standards (IFRS) when it prepared its financial statements?
Is the corporation inactive? 280 1 Yes 2 No X
Specify the principal products mined, manufactured, 284 SOFTWARE DEVELOPMENT 285 100.000 %
sold, constructed, or services provided, giving the
approximate percentage of the total revenue that each product or service represents.
Did the corporation immigrate to Canada during the tax year?
Did the corporation emigrate to Canada during the tax year? 292 1 Yes 2 No X
Do you want to be considered as a quarterly instalment remitter if you are eligible?
If the corporation was eligible to remit instalments on a quarterly basis for part of the tax year, provide the date the corporation ceased to be eligible Year Month Day If the corporation's major business activity is construction, did you have any subcontractors during the tax year?
Taxable income —
Net income or (loss) for income tax purposes from Schedule 1, financial statements, or GIFI
Deduct:
Charitable donations from Schedule 2
Cultural gifts from Schedule 2
Gifts of medicine from Schedule 2
Taxable dividends deductible under section 112 or 113, or subsection 138(6)
from Schedule 3
Part VI.1 tax deduction* Non-capital losses of previous tax years from Schedule 4 325 331
Net capital losses of previous tax years from Schedule 4
Restricted farm losses of previous tax years from Schedule 4
Farm losses of previous tax years from Schedule 4
Limited partnership losses of previous tax years from Schedule 4
Taxable capital gains or taxable dividends allocated from a central credit union
Trospecion a and unouscaser's soldies
▶ R
Subtotal B Subtotal (amount A minus amount B) (if negative, enter "0") 498,655 C
Subtotal B Subtotal (amount A minus amount B) (if negative, enter "0") 498,655 C
Subtotal

Small business deduction ————————————————————————————————————			Protected B when complete	
Canadian-controlled private corporations (CCPCs) throughout th	e tax year			
Income from active business carried on in Canada from Schedule 7.			400 489,917 A	
Taxable income from line 360 on page 3, minus 100/28 of the amount line 636** on page 8, and minus any amount that, because of federal	law, is exempt from Pa	rt I tax	405 498,655 B 410 500,000 C	
Business limit (see notes 1 and 2 below)			500,000	
Notes:				
 For CCPCs that are not associated, enter \$500,000 on line 410. H weeks, prorate this amount by the number of days in the tax year 				
2. For associated CCPCs, use Schedule 23 to calculate the amount	to be entered on line 4°	10.		
Business limit reduction:				
Amount C 500,000 × 415 *** D	=	តសត់មិន្ទិត្រស់ក្និកក្នុងស្ថាស់ក្នុងប៉ុន្តែ	E	
11,250				
Reduced business limit (amount C minus amount E) (if negative, ente	er "0")	*****************	425 500,000 F	
Business limit the CCPC assigns under subsection 125(3.2) (from total				
Amount F minus amount G	-		500,000 H	
THE WHITE BEING STOWN OF THE PARTY OF THE PA		******		
Small business deduction	of days in the tax year			
Amount A, B, C, or H, 489.917 × befo	re January 1, 2016	× 179	6 =1	
whichever is the least Number	of days in the tax year	366		
Amount A, B, C, or H, 489,917 × after	of days in the tax year December 31, 2015	366 × 17.	5% = 85,735 2	
Number	r of days in the tax year	r 366 ter amount I on line J on page 8)	430 85,735 1	
I Otali C	or amounts I and 2 (en	ter amount i on line a on page of		
income (line 604) and without reference to the corporate tax reduct ** Calculate the amount of foreign business income tax credit deduct *** Large corporations • If the corporation is not associated with any corporations in both taxable capital employed in Canada for the prior year minus \$10 • If the corporation is not associated with any corporations in the on line 415 is: (total taxable capital employed in Canada for the • For corporations associated in the current tax year, see Schedu Specified corporate income and assignment under subsection 12	ible on line 636 without the current and previo 0,000,000) x 0.225%. 0,000,000) x 0.225%. current tax year, but wa current year minus \$10 le 23 for the special rul	t reference to the corporation tax rus tax years, the amount to be eas as associated in the previous tax 0,000,000) x 0.225%.	ntered on line 415 is: (total	
J Name of corporation receiving the income and assigned amount	K Business number of the corporation	L Income for the small business deduction given to the corporation identified in column J [under clause 125(1) (a)(i)(B)] \$	M Business limit assigned to corporation identified in column J 4	
1.				
2.				
3.				
4.				
5.		Tetal	Total	
Notes: Total T				
(B) it is not the case that all or substantially all of the corporation's	•	m an active business is from the	provision of services or	
property to (I) persons (other than the private corporation) with which the co (II) partnerships with which the corporation deals at arm's length with the corporation holds a direct or indirect interest.			ot deal at arm's length	
4 The amount of the business limit you assign cannot be greater tha	n the amount in column	n I		

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:34 AM

General tax reduction for Canadian-controlled private corporations					
Canadian-controlled private corporations throughout the tax year					
Taxable Income from page 3 (line 360 or amount Z, whichever applies)	v.e	498,655 A			
Lesser of amounts B9 and H9 from Part 9 of Schedule 27 Amount K13 from Part 13 of Schedule 27 Personal services business income Amount used to calculate the credit union deduction (amount F from Schedule 17) Amount from line 400, 405, 410, or Amount H on page 4, whichever is the least Aggregate investment income from line 440 on page 6* 8,738	B C D E F G				
Subtotal (add amounts B to G) 498,655	>	498,655_H			
Amount A minus amount H (if negative, enter "0")					
General tax reduction for Canadian-controlled private corporations – Amount I multiplied by 13%					
Except for a corporation that is, throughout the year, a cooperative corporation (within the meaning assigned by subsection 136(2)) or a credit union.					

General tax reduction ————————————————————————————————————		
Do not complete this area if you are a Canadian-controlled private corporation, an investment corporation, a mo mutual fund corporation, or any corporation with taxable income that is not subject to the corporation tax rate of		corporation, a
Taxable income from page 3 (line 360 or amount Z, whichever applies)		K
Lesser of amounts 89 and H9 from Part 9 of Schedule 27	L	
Amount K13 from Part 13 of Schedule 27	M	
Personal services business income	N	
Amount used to calculate the credit union deduction (amount F from Schedule 17)	0	
Subtotal (add amounts L to O)	. · _	P
Amount K minus amount P (if negative, enter *0")		Q
General tax reduction – Amount Q multiplied by 13% Enter amount R on line 639 on page 8.		R

— Refundable portion of Par				
Canadian-controlled private corpora	tions throughout the tax year			
Aggregate investment income from Sci	nedule 7	440	8,738 A	
Amount A 8,738 ×	Number of days in the tax year before January 1, 2016	× 26.67 ·% =	1	
	Number of days in the tax year	366		
Amount A8,738 ×	Number of days in the tax year after December 31, 2015 Number of days in the tax year	366 × 30.67 % =	2,680 2	
	Number of days in the tax year	300		
	Subtotal (amount 1 plus amount 2)	2,680	B
Foreign investment income from Sched	lule 7	445	C	
Amount C ×	Number of days in the tax year before January 1, 2016	× 9.33 % =	3	
	Number of days in the tax year	366		
	Number of days in the tax year			
Amount C ×	after December 31, 2015	366 × 8.00 % =	4	
	Number of days in the tax year	366		
	Subtotal (amount 3 plus amount 4)	D	
Foreign non-business income tax credi	t from line 632 on page 8 minus amou	nt D (if negative, enter "0").		E
Amount B minus amount E (if negative	, enter "0")			2,680 F
Foreign non-business income tax credi	from line 632 on page 8,	********	G	
Number of days in the tax year before January 1, 2016	× 35.00 =		_	
Number of days in the tax year	366		5	
Number of days in the tax year				
after December 31, 2015	366 × 38.67 =		38.6667 6	
Number of days in the tax year	366			
	Subtotal (amount 5 plus amount 6)	38.6667 H	
Amount G ×	100 =		1	
	Н 38,6667	**********		
Taxable income from line 360 on page	3		498,655 J	
Deduct:				
Amount from line 400, 405, 410, or Amount	nt H on page 4, whichever is the least	489,917 K		
Amount 1	**********	L		
Foreign business income tax		M		
credit from line 636 on page 8	*******	489.917 ▶	489,917 N	
	Subtotal (total of amounts K to M)	mount J minus amount N)	9 729 0	
	Cabicial (a)	nioditt o miniad dinoditt 147		
	Number of days in the tax year			
Amount O 8,738 ×	before January 1, 2016	× 26.67 % =	7	
	Number of days in the tax year	366		
Amount O 8,738 ×	Number of days in the tax year after December 31, 2015	<u>366</u> × 30.67 % =	2,680 8	
	Number of days in the tax year	366	2,680 ▶	2 600 0
	Subtotal (amount 7 plus amount 8)	2,000	P
Part I tax payable minus investment ta	x credit refund (line 700 minus line 780	O from page 9)		54,820 Q
Refundable portion of Part I tax – Am	ount F, P, or Q, whichever is the least	g	450	2,680 R

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:34 AM

Refundable dividend tax on hand		
Refundable dividend tax on hand at the end of the previous tax year	ğ.	
Dividend refund for the previous tax year	>	48 A
Add the total of:		
Refundable portion of Part I tax from line 450 on page 6	В	
Total Part IV tax payable from Schedule 3	C	
Net refundable dividend tax on hand transferred from a predecessor corporation on amalgamation, or from a wound-up subsidiary corporation	e.	
2,680	>	2,680 D
Refundable dividend tax on hand at the end of the tax year – Amount A plus amount D	485	2,728

Dividend refund						
Private and subject corporation	s at	the time taxable dividends were p	aid in the	a tax year		
Taxable dividends paid in the to	ax ye	ear from line 460 on page 3 of Sched	lule 3	*******	E	
Amount E	×	Number of days in the tax year before January 1, 2016 Number of days in the tax year	366	_ ×33.33.% =	1	
Amount E	×	Number of days in the tax year after December 31, 2015 Number of days in the tax year	366 366	_ × 38.33 % =	2	
		Subtotal (a	amount 1	plus amount 2)	>	F
Refundable dividend tax on har	nd at	the end of the tax year from line 48	5 above .			2,728 G
Dividend refund - Amount F of Enter amount H on line 784 on		whichever is less				H

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:34 AM

Protected	l B wh	en completed
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— Part I tax ———————————————————————————————————
Base amount Part I tax – Taxable income from page 3 (line 360 or amount Z, whichever applies) multiplied by 38% 550 189,489 A
Personal services business income tax (section 123.5) Number of days in the tax year
Taxable income from a personal services business 555 × after December 31, 2015 366 × 5.00 %= B Number of days in the tax year 366
Recapture of investment tax credit from Schedule 31
Calculation for the refundable tax on the Canadian-controlled private corporation's (CCPC) investment income (if it was a CCPC throughout the tax year)
Aggregate investment income from line 440 on page 6
Taxable income from line 360 on page 3
Amount from line 400, 405, 410, or Amount H on page 4, whichever is the least
Net amount (amount E minus amount F) 8,738 8,738 G
Amount D or G, whichever is less 8,738 × Number of days in the tax year before January 1, 2016 × 6.67 %= 1 Number of days in the tax year 366
Amount D or G, whichever is less 8,738 × number of days in the tax year after December 31, 2015 366 ×10.67 % = 932 2 Number of days in the tax year 366
Refundable tax on CCPC's investment income (amount 1 plus amount 2)
Deduct:
Small business deduction from line 430 on page 4
Federal tax abatement
Manufacturing and processing profits deduction from Schedule 27
Investment corporation deduction
Additional deduction – credit unions from Schedute 17
Federal foreign non-business income tax credit from Schedule 21
Federal foreign business income tax credit from Schedule 21
General tax reduction for CCPCs from amount J on page 5
General tax reduction from amount R on page 5
Federal logging tax credit from Schedule 21
Eligible Canadian bank deduction under section 125.21
Federal qualifying environmental trust tax credit
Investment tax credit from Schedule 31
Subtotal 135,601 × 135,601 ×
Part I tax payable – Amount I minus amount K

Privacy statement –

Personal information is collected under the *Income Tax Act* to administer tax, benefits, and related programs. It may also be used for any purpose related to the administration or enforcement of the Act such as audit, compliance and the payment of debts owed to the Crown. It may be shared or verified with other federal, provincial/territorial government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties or other actions. Under the *Privacy Act*, individuals have the right to access their personal information and request correction if there are errors or omissions. Refer to Info Source <a href="mailto:cragge

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:34 AM

	nen completed
Federal tax	
	54,820
Part II surtax payable from Schedule 46	
Part III.1 tax payable from Schedule 55	
Part IV tax payable from Schedule 3	
Part IV.1 tax payable from Schedule 43	
Part VI tax payable from Schedule 38	
Part VI.1 tax payable from Schedule 43	
Part XIII.1 tax payable from Schedule 92	
Part XIV tax payable from Schedule 20	
Total federal tax	54,820
Add provincial or territorial tax:	
Provincial or territorial jurisdiction	
(If more than one jurisdiction, enter "multiple" and complete Schedule 5)	
110- P 1110-1101 CO. Palyable (01:00-pt 400000 alia 1 incolar)	18,323
	73,143 A
Deduct other credits:	
Investment tax credit refund from Schedule 31	
Dividend refund from amount H on page 7	
Federal capital gains refund from Schedule 18	
Federal qualifying environmental trust tax credit refund	
Canadian film or video production tax credit refund (Form T1131)	
Film or video production services tax credit refund (Form T1177)	
Tax withheld at source	
Total payments on which tax has been withheld 801	
Provincial and territorial capital gains refund from Schedule 18	
Provincial and territorial refundable tax credits from Schedule 5	
Tax instalments paid	
Total credits 890	В
	70.640
Refund code 894 Overpayment Balance (amount A minus amount B)	73,143
Totalia dode Compayillerit	
Direct deposit request If the result is positive, you have a balance unpair	d
To have the corporation's refund deposited directly into the corporation's bank	
account at a financial institution in Canada, or to change banking information you Enter the amount on whichever line applies.	
already gave us, complete the information below: Generally, we do not charge or refund a difference \$2 or less.	e of
Start Change information 910	
Branch number Balance unpaid 73,14	43 4
914 918 For information on how to make your payment, go	_
Institution number Account number cra.gc.ca/payments.	IU
If the corporation is a Canadian-controlled private corporation throughout the tax year, does it qualify for the one- month extension of the date the balance of tax is due?	No 🗍
should extension of the date the valuates of tax is due:	اسما
920 40050	
If this return was prepared by a tax preparer for a fee, provide their EFILE number	
To the foreign was proported by a tax property for a loc, profited than 21 lee hornoot	
If this return was prepared by a tax preparer for a fee, provide their EFILE number	
To the foreign was proported by a tax property for a loc, profited than 21 lee hornoot	,
— Certification —	
— Certification — 951 BJORN 954 DIRECTOR Last name First name Position, office, or rank am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, a	and that
Certification I, 950 LARSEN Last name BJORN First name First name Position, office, or rank and authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, at the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for the	and that
— Certification I. 950 LARSEN Last name BJORN First name First name Position, office, or rank at an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, at the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for the	and that
Certification I, 950 LARSEN Last name First name First name First name Position, office, or rank am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, a the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for th year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return. 955 2017/05/15	nis tax
Certification I, 950 LARSEN Last name First name First name First name Position, office, or rank the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for th year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return.	997
Certification I, 950 LARSEN Last name Last name Signature of the authorized signing officer of the corporation Position, office, or rank arm an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, at the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for the year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return. 955 2017/05/15 Date (yyyy/mm/dd) Signature of the authorized signing officer of the corporation Telephone num	997 ober
Certification I, 950 LARSEN Last name Signature of the authorized signing officer of the corporation Signature of the authorized signing officer of the corporation Signature of the authorized signing officer. Position, office, or rank Is the contact person the same as the authorized signing officer of the corporation Position, office, or rank Position, office,	997 Ober
Certification I. 950 LARSEN Last name First name First name First name First name Position, office, or rank am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, at the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for th year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return. 955 2017/05/15 Date (yyyy/mm/dd) Signature of the authorized signing officer of the corporation Is the contact person the same as the authorized signing officer? If no, complete the information below	997 nber No X
Certification I. 950 LARSEN Last name Last name First name First name First name First name Position, office, or rank am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, a the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for th year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return. 955 2017/05/15 Date (yyyy/mm/dd) Signature of the authorized signing officer of the corporation Is the contact person the same as the authorized signing officer? If no, complete the information below 957 1 Yes 2 N	997 nber No X
Certification I. 950 LARSEN Last name First name First name First name First name Position, office, or rank am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, at the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for th year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return. 955 2017/05/15 Date (yyyy/mm/dd) Signature of the authorized signing officer of the corporation Is the contact person the same as the authorized signing officer? If no, complete the information below	997 nber No X



Agence du revenu du Canada

Net Income (Loss) for Income Tax Purposes

Corporation's name	Business number	Tax year-end Year Month Day
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	2 0 1 6 1 2 3 1

- The purpose of this schedule is to provide a reconciliation between the corporation's net income (loss) as reported on the financial statements and its net income (loss) for tax purposes. For more information, see the T2 Corporation Income Tax Guide.
- All legislative references are to the Income Tax Act.

Amount calculated on line 9999 from Schedule 125	413,172 A
Add:	
Provision for income taxes – current	,143
Provision for income taxes – deferred	
Interest and penalties on taxes. 103 2	,107
Amortization of tangible assets. 104 11	,957
Amortization of natural resource assets	
Amortization of intangible assets	
Recapture of capital cost allowance from Schedule 8	
Gain on sale of eligible capital property from Schedule 10	
Loss in equity of subsidiaries and affiliates.	
Loss on disposal of assets	
Charitable donations and gifts from Schedule 2	
Taxable capital gains from Schedule 6.	
Political donations. 114	
Holdbacks	
Deferred and prepaid expenses 116	
Depreciation in inventory – end of year	
Scientific research expenditures deducted per financial statements	
Capitalized interest.	
400	
424	,722
Non-deductible meals and entertainment expenses	
422	
191	
425	
4.76	
107	
190	
420	
Income or loss for tax purposes – partnerships	
424	
Income shortfall adjustment and additional amount from Schedule 73,	
Income or loss for tax purposes – joint ventures,	565
Total of additions from line F on Page 3	,565
Total (lines 101 to 199) 500 97	<u>.494</u> ▶ <u>97,494</u> B



Amount A plus amount B	<u>510,666</u> C
Deduct:	4
Gain on disposal of assets per financial statements.	
Non-taxable dividends under section 83 from Schedule 3	
Capital cost allowance from Schedule 8	
Terminal loss from Schedule 8	
Cumulative eligible capital deduction from Schedule 10	
Allowable business investment loss from Schedule 6	
Foreign non-business tax deduction under subsection 20(12)	
Holdbacks	
Deferred and prepaid expenses	
Depreciation in inventory – end of prior year	
SR&ED expenditures claimed in the year on line 460 from Form T661	
Other reserves on line 280 from Schedule 13	
Reserves from financial statements—balance at the beginning of the year	
Patronage dividend deduction on line 116 from Schedule 16	
Contributions to deferred income plans from Schedule 15	
Total of deductions from line G on Page 4	
Total (lines 401 to 499) 510 12,011	12,011 D
Net income (loss) for income tax purposes (amount C minus amount D).	498,655 E
Enter amount E on line 300 on page 3 of the T2 return	

d:		
Accounts payable and accruals for cash basis – closing		201
Accounts receivable and prepaid for cash basis – opening		202
Accrual inventory – opening		203
Accrued dividends – prior year		204
Capital items expensed		206
Debt issue expense		208
Deemed dividend income		209
Deemed interest on loans to non-residents		210
Deemed interest received		211
Development expenses claimed in current year	***************	212
Dividend stop-loss adjustment		213
Dividends credited to the investment account.		214
Exploration expenses claimed in current year		215
Financing fees deducted in books		216
Foreign accrual property income		217
Foreign affiliate property income.		218
Foreign exchange included in retained earnings		219 2,56
Gain on settlement of debt		220
Interest paid on income debentures		221
Limited partnership losses from Schedule 4.		222
Mandatory inventory adjustment – included in current year		224
Non-deductible advertising		226
Non-deductible interest		227
Non-deductible legal and accounting fees		228
Optional value of inventory – included in current year		
Other expenses from financial statements		230
		231
Recapture of SR&ED expenditures from Form T661	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	232
		233
Restricted farm losses – current year from Schedule 4	,	234
Sales tax assessments	3000	235
Share issue expense		236
Write-down of capital property		237
Amounts received in respect of qualifying environmental trust per paragraphs 12(1)(z.1) are		236
Contractors' completion method adjustment: revenue net of costs on contracts under 2 year		
Taxable/non-deductible other comprehensive income items		239
Book loss on joint ventures.		248
Book loss on partnerships		
Other additions:		
1 Description	2 Amount	
605	295	
_		
If you need more space, attach additional schedules. Total of column 2		296



Agence du revenu du Canada

Tax Calculation Supplementary - Corporations

Schedule 5 Code 1501 Protected B when completed

- · Use this schedule if, during the tax year, the corporation:
 - had a permanent establishment in more than one jurisdiction (corporations that have no taxable income should only complete columns A, B, and D in Part 1);
 - is claiming provincial or territorial tax credits or rebates (see Part 2); or
 - has to pay taxes, other than income tax, for Newfoundland and Labrador, or Ontario (see Part 2).
- · All legislative references mentioned in this schedule are from the Income Tax Regulations.
- For more information, see the T2 Corporation Income Tax Guide.
- · For the regulation number to be entered in field 100 of Part 1 on page 2, see the chart below.

Regulation	Type of corporation	Type of entry in column B	Type of entry in column D	
402	Corporations not specified below	Salaries and wages	Gross revenue	
403	Insurance corporations	No entry required	Net premiums	
404	Banks	Salaries and wages	Amount of loans and deposits	
405	Trust and loan corporations	No entry required	Gross revenue	
406(1) (Note 1)	Railway corporations	Equated track miles/kilometres	Gross ton miles/kilometres	
406(2) (Note 1)	Railway corporations (Note 2)	The allocation depends on the line of business; see the appropriate regulation for the type of allocation required.		
407	Airline corporations	Capital cost of fixed assets (Note 3) Revenue plane miles/kilometr		
498	Grain elevator operators	Salaries and wages	Bushels of grain received	
409	Bus and truck operators	Salaries and wages	Miles/kilometres driven	
410 (Note 5)	Ship operators	Salaries and wages (Note 6) Port-call-tonnage		
411	Pipeline operators	Salaries and wages	Miles/kilometres of pipeline	
412	Divided businesses	The allocation depends on the line of business; see the appropriate regulation for the type of allocation required.		
413	Non-resident corporations	The allocation depends on the line of business; see the appropriate regulation for the type of allocation required.		

Note 1: Enter brackets when completing field 100 in Part 1 for this regulation.

Note 2: Operating an airline service, ships, hotels, or receiving substantial revenues from petroleum or natural gas royalties.

Note 3: Exclude aircraft.

Note 4: Exclude miles/kilometres flown over the territorial waters of Canada.

Note 5: In Part 1, instead of taxable income, use the excess of taxable income over allocable income for the calculation in column C and allocable income for the calculation in column E.

Note 6: Only where taxable income exceeds allocable income.



Tax Calculation Supplementary – Corporations

Schedule 5 Code 1501

Protected B when completed

Corporation's name	Business number	Tax year-end
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	Year Month Day 2 0 1 6 1 2 3 1

Part 1	Allocation of t	axable income				
100	<u> </u>	Enter the regulat	ion that applies (402 to 4	13) from page 1,		
Tick yes if the permanent es	A isdiction corporation had a stablishment in the iring the tax year.*	B Total salaries and wages paid in jurisdiction	C (B × taxable income) + G	D Gross revenue attributable to jurisdiction	E (D × taxable income) + H	F Allocation of taxable income (C + E) × 1/2** (where either G or H is nil, do not multiply by 1/2
Newfoundand and Labredor	003 1 Yes	103		143		do not multiply by 1/2
Newfoundland and Labrador Offshore	004 1 Yes	104		144		
Prince Edward Island	005 1 Yes	105		145		
Nova Scotia	007 1 Yes	107		147		
Nova Scolia Offshore	008 1 Yes	108		148		
New Brunswick	009 1 Yes	109		149		
Quebec	011 1 Yes	111		151		
Ontario	013 1 Yes	113		153		498,655
Manitoba	015 1 Yes	117		157		
Saskatchewan	017 1 Yes	119		159		
Alberta	019 1 Yes	121		161		
British Columbia	021 1 Yes	123		163		
Yukon	023 1 Yes	125		165		
Territories	025. 1 Yes	126		166		
Nunavut Outside	026 1 Yes	127		167		
Canada	027 1 Yes	129) G		169 H		
Total						498.655

Notes:

- After determining the allocation of taxable income, you have to calculate the corporation's provincial or territorial tax payable. For more
 information on how to calculate the tax for each province or territory, see the instructions for Schedule 5 in
 the T2 Corporation Income Tax Guide.
- 2. If the corporation has provincial or territorial tax payable, complete Part 2 on the following pages.
- If the corporation is a member of a partnership and the partnership had a permanent establishment in a jurisdiction, select the
 jurisdiction in Column A and include your proportionate share of the partnership's salaries and wages and gross revenue in
 columns B and D, respectively.

^{* &}quot;Permanent establishment" Is defined in subsection 400(2).

^{**} For corporations other than those described under section 402, use the appropriate calculation described in the Regulations to allocate taxable income.

Part 2 – Provincial and territorial tax payable, tax credits, and rebates	
Newfoundland and Labrador	
Newfoundland and Labrador tax before credits (from Schedule 307)	
Add: Newfoundland and Labrador offshore tax (from Schedule 307)	
Gross Newfoundland and Labrador tax	A1
Deduct: Newfoundland and Labrador political contribution tax credit Contribution	
Newfoundland and Labrador manufacturing and processing profits tax credit (from Schedule 300)	
Newfoundland and Labrador venture capital tax credit (from Schedule 308)	
Newfoundland and Labrador resort property investment tax credit (from Schedule 304) 507 Subtotal	B1
Subtotal (amount A1 minus amount B1) (if negative, enter "0")	C1
Add: Newfoundland and Labrador capital tax on financial institutions (from Schedule 305)	
Total Newfoundland and Labrador tax payable before refundable credits (amount C1 plus amount on line 518)	D1
Deduct: Newfoundland and Labrador research and development tax credit (from Schedule 301)	
Subtotal	E1
Net Newfoundland and Labrador tax payable or refundable credit (amount D1 minus amount E1)	F1
* To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronically, send the original or a copy the certificate to your tax centre.	of
Prince Edward Island	
Prince Edward Island tax before credits (from Schedule 322)	_A2
Deduct:	
Prince Edward Island political contribution tax credit	
Prince Edward Island foreign tax credit (from Schedule 21)	B2
Subtotal	-
Net Prince Edward Island tax payable (amount A2 minus amount B2) (if negative, enter "0")	C2

Part 2 - Provincial and territorial tax payable, tax credits, and rebates (continued)	Protected B when completed
Nova Scotia	
Nova Scotla tax before credits (from Schedule 346)	*
Add:	
Nova Scotia offshore tax (from Schedule 346)	
Recapture of Nova Scotia research and development tax credit (from Schedule 340)	A3
Deduct:	
Nova Scotia political contribution tax credit	
Contribution	
Nova Scotia foreign tax credit (from Schedule 21)	
Nova Scotia corporate tax reduction for new small businesses * (from Schedule 341) 556	
Certificate number	▶ 83
Subtotal	
Total Nova Scotia tax payable before refundable credits (amount A3 minus amount B3) (if negative, enter "0"),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Deduct: Nova Scotia film industry tax credit **	
Certificate number 836	
Nova Scriffa research and development tay credit (from Schedule 340) 566	
Nova Scotia digital media tax credit **	
Certificate number	
Nova Scotla capital investment tax credit *** ,	
Certificate number	
Nova Scotia digital animation tax credit ***	
Certificate number	▶ D3
Subtotal	
Net Nova Scotla tax payable or refundable credit (amount C3 minus amount D3) (if a credit, enter amount in brackets), Include this amount on line 255 on page 8.	. 224
	tax minus all other
* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia Nova Scotia tax credits (including the refundable credits).	
The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia to Nova Scotia tax credits (including the refundable credits). To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronical.	
* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia Nova Scotia tax credits (including the refundable credits). ** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics original or a copy of the certificate to your tax centre.	ally, send the
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* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia to Nova Scotia tax credits (including the refundable credits). *** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics original or a copy of the certificate to your tax centre. **** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics certificate in case we ask for it later. **** New Brunswick New Brunswick tax before credits (from Schedule 366)	ally, send the
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* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia to Nova Scotia tax credits (including the refundable credits). *** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics original or a copy of the certificate to your tax centre. **** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics certificate in case we ask for it later. **** New Brunswick New Brunswick tax before credits (from Schedule 366)	ally, send the
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* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia to Nova Scotia tax credits (including the refundable credits). ** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filling your T2 return electronics original or a copy of the certificate to your tax centre. *** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filling your T2 return electronics certificate in case we ask for it later. *** New Brunswick New Brunswick tax before credits (from Schedule 366)	A4
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* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia to Nova Scotia tax credits (including the refundable credits). ** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics original or a copy of the certificate to your tax centre. *** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filing your T2 return electronics certificate in case we ask for it later. *** New Brunswick New Brunswick tax before credits (from Schedule 366) Add: Recapture of New Brunswick research and development tax credit (from Schedule 360). Gross New Brunswick tax Deduct: New Brunswick political contribution tax credit Contribution New Brunswick foreign tax credit (from Schedule 21) New Brunswick small business investor tax credit (from Schedule 367). Subtotal Total New Brunswick tax payable before refundable credits (amount A4 minus amount B4) (if negative, enter "0")	A4
* The amount of Nova Scotia corporate tax reduction for new small businesses cannot be more than the gross Nova Scotia tax credits (including the refundable credits). *** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filling your T2 return electronical original or a copy of the certificate to your tax centre. **** To claim the credit, file the original or a copy of the certificate with your T2 return. If you are filling your T2 return electronical certificate in case we ask for it later. **** New Brunswick New Brunswick tax before credits (from Schedule 366)	A4
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Part 2 – Provincial and territorial tax payable, tax credits, and rebates (continued)		
Ontario		
Ontario basic Income tax (from Schedule 500)	,	
Deduct: Ontario small business deduction (from Schedule 500) 402 34,294 Subtotal 23,051		23,051 A6
Add: Ontario additional tax re Crown royalties (from Schedule 504)		20:001
Subtotal	-	B6
Subtotal (amount A6 plus amount	nt B6)	23,051 C6
Ontario resource tax credit (from Schedule 504)	.	D6
Subtotal (amount C6 minus amount D6) (if negative, enter	er "0")	23,051 E6
Deduct: Ontario research and development tax credit (from Schedule 508)	416	
Ontario corporate income tax payable before Ontario corporate minimum tax credit and Ontario community food program donation tax credit for farmers (amount E6 minus amount on line 416) (if negative, enter "0")		23,051 F6
Deduct:		
Ontario corporate minimum tax credit (from Schedule 510)	418	
Ontario corporate income tax payable (amount F6 minus amounts on line 418 and line 420) (if negative, enter "0")		23,051 G6
Add:		
Ontario corporate minimum tax (from Schedule 510)	·	Н6
Total Ontario tax payable before refundable credits (amount G6 plus amount H6)		23,051 16
Total Official Cax payable before returnable clautis (amount Go plus amount no)		20,001
Deduct: Ontario qualifying environmental trust tax credit. Ontario co-operative education tax credit (from Schedule 550)	·	4,728 J6
Net Ontario tax payable or refundable credit (amount l6 minus amount J6)	290	18,323 K6

— Part 2 – Provincial and territorial tax payable, tax credits, and rebates (continued)	
Manitoba Manitoba	230 A7
Manitoba tax before credits (from Schedule 383)	
Deduct: Manitoba foreign tax credit (from Schedule 21) Manitoba rental housing construction tax credit (from Schedule 394) Manitoba manufacturing investment tax credit (from Schedule 381) Manitoba research and development tax credit (from Schedule 380) Manitoba co-op education and apprenticeship tax credit (from Schedule 384) Manitoba odour-control tax credit (from Schedule 385) Manitoba small business venture capital tax credit (from Schedule 387) Manitoba cooperative development tax credit (from Schedule 390) Manitoba Neighbourhoods Alive! tax credit (from Schedule 391) Total Manitoba tax payable before refundable credits (amount A7 minus amount B7) (if negative, enter "0") Deduct: Manitoba cultural industries printing tax credit Manitoba refundable cooperative development tax credit (from Schedule 390)	B7
Manitoba refundable research and development tax credit (from Schedule 380) Manitoba interactive digital media tax credit Manitoba book publishing tax credit (from Schedule 389) Manitoba green energy equipment tax credit Manitoba film and video production tax credit (from Schedule 388) Manitoba refundable manufacturing investment tax credit (from Schedule 381) Manitoba paid work experience tax credit * (from Schedule 384) Manitoba refundable odour-control tax credit for agricultural corporations (from Schedule 385). Manitoba data processing investment tax credits (from Schedule 392) Manitoba nutrient management tax credit (from Schedule 393) Manitoba refundable rental housing construction tax credit (from Schedule 394) Manitoba community enterprise development tax credit	
Subtotal	D7
Net Manitoba tax payable or refundable credit (amount C7 minus amount D7) (if a credit, enter amount in brackets) Include this amount on line 255 on page 8. *The name of the credit changed from Manitoba co-op education and apprenticeship tax credit to Manitoba paid work experi as of September 1, 2015.):
Saskatchewan	PA W AN OWING THE BE AN
Saskatchewan tax before credits (from Schedule 411)	235A8
Saskatchewan political contribution tax credit Contribution Saskatchewan foreign tax credit (from Schedule 21) Saskatchewan manufacturing and processing profits tax reduction (from Schedule 404). Saskatchewan manufacturing and processing investment tax credit (from Schedule 402). Saskatchewan research and development tax credit (from Schedule 403). Subtotal	
Total Saskatchewan tax payable before refundable credits (amount A8 minus amount B8) (if negative, enter "0"),	C8
Saskatchewan qualifying environmental trust tax credit	
Saskatchewan film employment tax credit*	
Certificate number	
Subtotal	D8
Net Saskatchewan tax payable or refundable credit (amount C8 minus amount D8)	E8 te must be sent to the tax centre,

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LEAN SOFTWARE \$ERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:33 AM

Protected B when completed Part 2 – Provincial and territorial tax payable, tax credits, and rebates (continued) 240 British Columbia tax before credits (from Schedule 427) Recapture of British Columbia scientific research and experimental **Deduct:** British Columbia foreign tax credit (from Schedule 21). British Columbia small business venture capital tax credit 881 882 British Columbia manufacturing and processing tax credit (from Schedule 426) 659 British Columbia SR&ED non-refundable tax credit (from Form T666). . . **B10** Subtotal C10 Total British Columbia tax payable before refundable credits (amount A10 minus amount B10) (if negative, enter "0") , , , Deduct: British Columbia qualifying environmental trust tax credit 671 672 British Columbia production services tax credit (from Form T1197)..... 673 British Columbia book publishing tax credit (amount on line 886 multiplied by 90%) Base amount of Publishing support 680 British Columbia interactive digital media tax credit (from Schedule 429)...... 681 British Columbia shipbuilding and ship repair industry tax credit (from Schedule 430) , , , , . . . D10 Subtotal E10 (if a credit, enter amount in brackets) Include this amount on line 255 on page 8. Yukon Yukon tax before credits (from Schedule 443) Deduct: Yukon political contribution tax credit Yukon foreign tax credit (from Schedule 21)...... Yukon manufacturing and processing profits tax credit (from Schedule 440) Subtotal C11 D11 Net Yukon tax payable or refundable credit (amount C11 minus amount D11) (if a credit, enter amount in brackets).... Include this amount on line 255 on page 8.

Schedule 5, Code 1501

—— Part 2 – Provincial and territorial tax payable, tax credits, and rebates (continued) ——		
Northwest Territories		
Northwest Territories tax before credits (from Schedule 461),	250	A12
Deduct: Northwest Territories political contribution tax credit	254	B12
Nunavut		*********
Nunavut tax before credits (from Schedule 481)	260	A13
Deduct: Nunavut political contribution tax credit		B13
Total Nunavut tax payable before refundable credit (amount A13 minus amount B13) (if negative, enter "0	//)	C13
Deduct: Nunavut business training tax credit (from Schedule 490)	740	D13
Net Nunavut tax payable or refundable credit (amount C13 minus amount D13) (if a credit, enter amount local local this amount on line 255 below.	nt in brackets); , ,	E13
Summary		ar all me digital in the part
Enter the total net tax payable or refundable credits for all provinces and territories on line 255.		
Net provincial and territorial tax payable or refundable credits	2551	18,323
If the amount on line 255 is positive, enter the net provincial and territorial tax payable on line 760 on page if the amount on line 255 is negative, enter the net provincial and territorial refundable tax credits on line 8	9 of the T2 return. 12 on page 9 of the T2 return,	

Canada Revenue Agence du reven du Canada

Aggregate Investment Income and Active Business Income

0000 1100
Protected B
when completed

Schedule 7

Corporation's name	Business number	Tax year-end
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	Year Month Day 2 0 1 16 1 2 3 1

- This version of Schedule 7 is for tax years ending after March 22, 2011. For tax years ending on or before March 22, 2011, see the previous-year
 versions available at www.cra.gc.ca/forms.
- This schedule is for the use of Canadian-controlled private corporations (CCPCs) to calculate:
 - for the purpose of determining the refundable portion of Part I tax, aggregate investment income and foreign investment income, as defined in subsection 129(4) of the Income Tax Act;
- specified partnership income, when the CCPC is a member of one or more partnership(s); and
- income from an active business carried on in Canada for the small business deduction.
- For more information, see the sections called "Small Business Deduction" and "Refundable Portion of Part I Tax" in Guide T4012, T2 Corporation – Income Tax Guide.

Part 1 – Aggregate investment income		
The aggregate investment income is the aggregate world source income.		
Eligible portion of taxable capital gains for the year	002	A
Deduct:		
Eligible portion of allowable capital losses for the year (including allowable business investment losses)	a	
Net capital losses of previous years claimed on line 332 on the T2 return	b	
Subtotal (amount a plus amount b)	>	В
Amount A minus amount B (if negative, enter "0")	С
Total income from property (include income from a specified investment business carried on in Canada other than income from a source outside Canada)	8,738 c	
Deduct:		
Exempt income, 1		
Amounts received from Agrilnvest Fund No. 2 that were included in computing the corporation's income for the year		
Taxable dividends deductible (total of column F on Schedule 3 minus related expenses)		
Business income from an interest in a trust that is considered property income under paragraph 108(5)(a) 072 4		
Subtotal (add amounts 1 to 4)	d	
Subtotal (amount c minus amount d)	8,738 🕨	8,738 D
Amo	unt C plus amount D	8,738 E
	-	
Total losses from property (include losses from a specified investment business carried on in Canada other than a loss from a source outside Canada)	082	F
Amount E minus amount F (if negative, enter "0")	092	8,738 G



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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:32 AM

Part 2 - Foreign investment income	Protected B when completed
The foreign investment income is all income from sources outside Canada.	
Eligible portion of taxable capital gains for the year	001 H
Eligible portion of allowable capital losses for the year (including allowable business investment losses)	009
Subtotal (amount H minus amount I) (if negative, enter	
Total income from property from a source outside Canada (net of related expenses) 019	
Deduct:	
Exempt income	
Taxable dividends deductible (total of column F on Schedule 3 minus related expenses)	
Business income from an interest in a trust that is considered property income under paragraph 108(5)(a) 0597	
Subtotal (add amounts 5 to 7)	
Subtotal (amount e minus amount f)	К
Amount J plus amour	nt K L
Total losses from property from a source outside Canada	069 M
Amount L minus amount M (if negative, enter "0")	079 N

		A			В	C
		Partnership name			Total Income (loss) of partnership from an active business	Corporation's share of amount in column B
		Values of the Control				
_			,			
	D	E	F	G	Н	L
p	Adjustments (add or deduct the orated amounts calculated under action 34.2° and deduct expenses curred by the corporation to earn partnership income)	Corporation's income (loss) of the partnership (column C plus column D)	Number of days in the partnership's fiscal period	Prorated business fimit (column C + column B) × [\$500,000 × (column F + 365)] (if column C is negative, enter *0*)**	Column E minus column G (If negative, enter "0")	Lesser of columns E and G (if column E is negative, enter *
	315	320	325	330		340
_						
_						
_			-			
	Total	350		Total	385	360
the	er than as a member of a p cified partnership loss of th	ar from an active business o partnership) – enter as a pos the corporation for the year – n column E)	sitive amount enter as a p	t	g	
the	er than as a member of a p cified partnership loss of th	partnership) enter as a pos ne corporation for the year	enter as a p	t		
the	er than as a member of a p cified partnership loss of th I of all negative amounts in	partnership) enter as a pos ne corporation for the year	enter as a p	t		
ne	er than as a member of a p cified partnership loss of th I of all negative amounts in unt at line 385 or amount i	partnership) – enter as a pos ne corporation for the year – n column E)	enter as a p Subtotal	oositive amount 380 (amount g plus amount h)	h	
nc	er than as a member of a p cified partnership loss of th I of all negative amounts in unt at line 385 or amount i	partnership) – enter as a poster corporation for the year – n column E)	enter as a p Subtotal	oositive amount 380 (amount g plus amount h)	h t	
nce	er than as a member of a p cified partnership loss of the I of all negative amounts in unt at line 385 or amount in cified partnership income or amount P at line T in Par in general, amounts include character and be in the sa income for the partnership from property, and \$30,000 40% active business Incom	partnership) — enter as a pos- ne corporation for the year — n column E)	enter as a p Subtotal 2), (3), and (rtnership inco tax year, and he corporation d 30% taxa	t	ions 34.2(4) and (11) are decide, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
ta	er than as a member of a p cified partnership loss of the I of all negative amounts in unt at line 385 or amount in cified partnership income or amount P at line T in Par in general, amounts include character and be in the sa income for the partnership from property, and \$30,000 40% active business Incom	partnership) — enter as a pos- ne corporation for the year — n column E)	enter as a p Subtotal 2), (3), and (rtnership inco tax year, and he corporation d 30% taxa	t	ions 34.2(4) and (11) are decide, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
ne te	er than as a member of a p cified partnership loss of the lof all negative amounts in unt at line 385 or amount in cified partnership income or amount P at line T in Partnership in general, amounts included character and be in the sa income for the partnership from property, and \$30,000 40% active business income deemed under subsection and	partnership) — enter as a pos- ne corporation for the year — n column E)	enter as a p subtotal 2), (3), and (rinership inco tax year, and the corporation d 30% taxa ess income:	t	ions 34.2(4) and (11) are decide, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
ta ta	er than as a member of a p cified partnership loss of th I of all negative amounts in unt at line 385 or amount i cified partnership income or amount P at line T in Par in general, amounts include character and be in the sa ncome for the partnership from property, and \$30,000 40% active business incom deemed under subsection is Add: - the ASPA under subsecti	partnership) — enter as a pos- ne corporation for the year — n column E)	sitive amount enter as a p Subtotal 2), (3), and (Intership income tax year, and the corporation of 30% taxa tax income:	t	ions 34,2(4) and (11) are decle, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the act only the portion of the fo	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
no ee te	er than as a member of a p cified partnership loss of th I of all negative amounts in unt at line 385 or amount i cified partnership income or amount P at line T in Par in general, amounts include character and be in the sa ncome for the partnership from property, and \$30,000 40% active business incom deemed under subsection is Add: - the ASPA under subsecti the income inclusion for a	partnership) — enter as a pos- ne corporation for the year — n column E)	sitive amount enter as a p Subtotal 2), (3), and (rinership inco tax year, and the corporation d 30% taxa taxs income: thedule 73) a partnershi a partnershi	t	ions 34,2(4) and (11) are decle, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the act only the portion of the fo	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
ne	er than as a member of a p cified partnership loss of th I of all negative amounts in unt at line 385 or amount i cified partnership income or amount P at line T in Par in general, amounts include character and be in the sa ncome for the partnership from property, and \$30,000 40% active business incom deemed under subsection is Add: - the ASPA under subsecti the income inclusion for a	partnership) — enter as a pos- ne corporation for the year — n column E)	sitive amount enter as a p Subtotal 2), (3), and (rinership inco tax year, and the corporation d 30% taxa taxs income: thedule 73) a partnershi a partnershi	t	ions 34,2(4) and (11) are decle, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the act only the portion of the fo	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
ncoee	er than as a member of a p cified partnership loss of th I of all negative amounts in unt at line 385 or amount i cified partnership income r amount P at line T in Par In general, amounts include character and be in the sa ncome for the partnership from property, and \$30,000 40% active business Income deemed under subsection in Add: - the ASPA under subsection - the previous-year transition Deduct:	partnership) — enter as a pos- ne corporation for the year — n column E)	Subtotal 2), (3), and (thership inco tax year, and he corporate as Income: hedule 73) a partnershi ion 34.2(12)	t	ions 34,2(4) and (11) are decle, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the act only the portion of the fo	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be
no entre de la composition della composition del	er than as a member of a p cified partnership loss of the lof all negative amounts in unt at line 385 or amount in cified partnership income r amount P at line T in Par in general, amounts include character and be in the sa ncome for the partnership from property, and \$30,000 40% active business income deemed under subsection in Add: - the ASPA under subsection - the previous-year transitic Deduct: - the previous-year ASPA - the previous-year income	partnership) — enter as a pos- ne corporation for the year — n column E)	Subtotal 2), (3), and (thership inco tax year, and he corporates as Income: hedule 73) a partnershi ion 34.2(12) column 5 of S ate member	t	ions 34,2(4) and (11) are deple, if a corporation receives 40,000 of active business incrual (ASPA) in respect of the fouct only the portion of the fouct only the second receives the fourth of the f	emed to have the same \$100,000 of partnership come, \$30,000 of income partnership would be ollowing amounts that is

Protected B when completed

Part 4 – Partnership income not eligible for the small business deduction		
Corporation's share of partnership income from active businesses carried on in Canada after deducting related expenses – from line 350 in Part 3 (if the net amount is negative, enter "0" on line U)	¢' e M (1.0 Å	Q
Specified partnership loss (from amount h in Part 3)		R
Subtotal (amount Q plus an	nount R)	s
Deduct:		
Specified partnership income (from amount P in Part 3)		Т
		•
Partnership income not eligible for the small business deduction (amount S minus amount T),, (enter on line p in Part 5)	450	U
Part 5 – Income from active business carried on in Canada ——————————————————————————————————		
Net income for income tax purposes from line 300 of the T2 return	j	
Plus:		
Allowable business investment loss from line 406 of Schedule 1	k	
	400.055	
Subtotal (amount j plus amount k) 498,655	498,655	. V
Deduct:		
Foreign business income after deducting related expenses*	1	
Toughts and the locate from the 440 of Debuguit 4	m	
Taxable capital gains from line 113 of Schedule 1	""	
Net property income (amount c** minus amounts 1, 2, and F* in Part 1)	n	
Personal services business income and other income after deducting related expenses* 520	0	
Subtotal (add amounts I to o) 8,738	8,738	W
Net amount (amount V minus amount W)	489,917	х
Deduct:		
	р	
Partnership income not eligible for the small business deduction (amount U in Part 4) ,	•	
Income allocated to the corporation under subsection 96(1.1)	q	
Income referred to in clause 125(1)(a)(i)(B) (total of column BB in Part 6)	r	
Subtotal (amount p, line 530 and amount r)	>	Υ
Specified corporate income (total of column CC in Part 6)		Y1
Income from active business carried on in Canada (amount X minus amount Y plus amount Y1)		z
(enter amount Z on line 400 of the T2 return – if negative, enter "0")		

** Net of related expenses.

* If negative, enter amount in brackets, and add instead of subtracting.

Canada Revenue Agency Agence du revenu du Canada

Capital Cost Allowance (CCA)

Schedule 8 Code 0603

Protected B when completed

Corporation's name Business Number Tax year- Year LEAN SOFTWARE SERVICES, INC. 85847 8530 RC 0001 3 0 4 6 6							Month Day						
_				d llOssital Osat A	llowance" in the T	'0 O	T 0.11			85847 8530	RC 0001	2,0,1,0	6 1 2 3 1
							ome Tax Guide.						
,	s the cor	poration electing	under Regulation	7 1101(5q)?	1 res	2 No X							
1	1	2	3	4	5	6	7	8	9	10	11	12	13
	Class number	Undepreciated capital cost at the beginning of the year (amount from column 13 of last year's schedule 8)	Cost of acquisitions during the year (new property must be available for use) (see note 1 below)	Adjustments and transfers (show amounts that will reduce the underpreciated capital cost in brackets) (see note 2 below)	Proceeds of dispositions during the year (amount not to exceed the capital cost)	Undepreciated capital cost (column 2 plus column 3 plus or minus column 4 minus column 5)	50% rule (1/2 of the amount, if any, by which the net cost of acquisitions exceeds column 5) (see note 3 below)	Reduced undepreciated capital cost (column 6 minus column 7)	CCA rate % (see note 4 below)	Recapture of capital cost allowance (see note 5 below)	Terminal loss	Capital cost allowance (for declining balance method, column 8 multiplied by column 9, or a lower amount (see note 6 below)	Undepreciated capital cost at the end of the year (column 6 minus column 12)
	200	201	203	205	207		211		212	213	215	217	220
1.	20	14,380	9,556			23,936	4,778	19,158	20			3,832	20,104
2.	50		29,546			29,546	14,773	14,773	55			8,125	21,421
3.												ε.	
1.													
5.													
5.										;-			
			×										
	lote 1. In	clude any property	acquired in previous n 3. List separately	s years that has not any acquisitions that	w become available at are not subject to	for use. This propert the 50% rule, see Re	y would have been guistion 1100(2) a	previously nd (2.2).					
1	lote 2. Er	nter in column 4. */	diustments and trai	nsfers", amounts the	at increase or reduce	the undepreciated	capital cost (colum	16)	Totals			11,957	
Items that increase the undepreciated capital cost include amounts transferred under section 85, or transferred on amalgamation or winding-up of a subsidiary. Items that reduce the undepreciated capital cost (show amounts that reduce the undepreciated capital cost in brackets) include government assistance received or entitled to be received in the year, or a reduction of capital cost after the application of section 80. See the T2 Corporation Income Tax Guide for other examples of adjustments and transfers to include in column 4. Note 3. The net cost of acquisitions is the cost of acquisitions (column 3) plus or minus certain adjustments and transfers from column 4.					Enter the total of	column 11 on line	107 of Schedule 1, 404 of Schedule 1. 403 of Schedule 1.						

Note 4. Enter a rate only if you are using the declining balance method. For any other method (for example the straight-line method, where calculations are always based on the cost of acquisitions), enter N/A. Then enter the amount you are claiming in column 12.
 Note 5. For every entry in column 10, the "Recapture of capital cost allowance" there must be a corresponding entry in column 5, "Proceeds of dispositions during the year". The recapture and terminal loss rules do not apply to passenger vehicles in Class 10.1.
 Note 6. If the tax year is shorter than 365 days, prorate the CCA claim. Some classes of properly do not have to be prorated.
 See the 72 Corporation Income Tax Guide for more information.

Reconciliation	of	NBV	and	UCC
NBV of capital assets, beginning of year		14,381		
Less: Land				
NBV of depreciable capital assets, beginning of year		14,381		14,381
UCC beginning of year		14,380		
Less: Opening Class 14 balance	-			
Adjusted UCC		14,380		14,380
Timing difference, beginning of year				1_A
CCA and amortization				
CCA claimed (except class 14)	+	11,957		
Terminal loss	+			
Recapture	•			
Amortization per financial statements	-	11,957		
Class 10.1				
Difference on purchase (cost less ceiling)	+			
Beginning UCC less CCA in year of disposal	+			
Proceeds from disposal of class 10.1 asset	_			
Gains and losses				
Gain on disposal of capital assets per financial statements	+			
Capital loss portion of total loss	+			
Loss on disposal of capital assets per financial statements	-			
Capital gain portion of total gain	-			
Other				
Operating leases capitalized for financial statement purposes	+			
Deductible items capitalized for financial statement purposes	+			
Section 85 difference	+			
Pre-valuation day depreciation	+			
THE ACCOUNTS OF THE PARTY OF TH	<u>+</u>			
Timing difference, current year	-		+	В
Timing difference, end of year (A + B)				1 C
Proof				
NBV of capital assets, end of year		41,526		
Less: Land	-			
NBV of depreciable capital assets, end of year		41,526		41,526
UCC end of year		41,525		
Less: Ending Class 14 balance	-			
Adjusted UCC		41,525	-	41,525
Timing difference as at 2016/12/31 (amount D should equal amount C)				1 D

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:32 AM

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	78	

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CUMULATIVE ELIGIBLE CAPITAL DEDUCTION

SCHEDULE 10 Code 0201

Name of corporation	Büsiness Number	Taxation year-end Year Month Day
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	2 0 1 1 6 1 2 3 1
 For use by a corporation that has eligible capital property. For more information, s A separate cumulative eligible capital account must be kept for each business. 	ee the T2 Corporation Income	Tax Guide.
Part 1 – Calculation of current year deducti	on and carry-forward ——	
Cumulative eligible capital - Balance at the end of the preceding taxation year (if negation)	tive, enter "0")	200 771 A
Add: Cost of eligible capital property acquired during the taxation year Other adjustments		
Subtotal (line 222 plus line 226)	x 3/4 =	_ В
Non-taxable portion of a non-arm's length transferor's gain realized on the transfer of an eligible capital property to the corporation after December 20, 2002 amount B minus amount C (If negative contents are contents as a content of the contents are contents.	x 1/2 =	D
Amount transferred on amalgamation or wind-up of subsidiary		224 E
	Subtotal (add amounts A, D, and	
Deduct: Proceeds of sale (less outlays and expenses not otherwise deductible) from the disposition of all eligible capital property during the taxation year	242 G	
The gross amount of a reduction in respect of a forgiven debt obligation as provided for in subsection 80(7)	244 H	
Other adjustments	nd I) x 3/4 =	248
Cumulative eligible capital balance (amount F minus amount J) (if amount K is negative, enter "0" at line M and proceed to Part 2)		771 K
Cumulative eligible capital for a property no longer owned after ceasing to carry on that busi	ness 249	
amount K77		
less amount from line 249	1 , 70/ - 250	54 *
Current year deduction (line 249 plus line 250) (enter this amount at line	405 of Schedule1)	54 ►54 L
Cumulative eligible capital Closing balance (amount K minus amount L) (if negative, er * You can claim any amount up to the maximum deduction of 7%. The deduction may not amount prorated by the number of days in the taxation year divided by 365.		717_ м
Part 2 Amount to be included in income arisi (complete this part only if the amount at line is	-	
Amount from line K (show as positive amount)		N
Total of cumulative eligible capital (CEC) deductions from income for taxation years beginning after June 30, 1988	400	_ 1
Total of all amounts which reduced CEC in the current or prior years under subsection 80 (7	401	_ 2
Total of CEC deductions claimed for taxation years beginning before July 1, 1988	3	
Negative balances in the CEC account that were included in income for taxation years beginning before July 1, 1988	4	
Line 3 minus line 4 (if negative, enter "0")	■ ▶	_ 5
Total of lines 1, 2, and 5		6
Amounts included in income under paragraph 14(1)(b), as that paragraph applied to taxation years ending after June 30, 1988 and before February 28, 2000, to the extent that it is for an amount described at line 400	7	
Amounts at line T from Schedule 10 of previous taxation years ending after February 27, 2000	8	
Subtotal (line 7 plus line 8) 409	_ ·	_ 9
Line 6 minus line 9 (if negative, enter "0")		= •°
Line N minus line O (if negative, enter "0")		/2 = P
Line P minus line Q (if negative, enter "0"),,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	R
Amount N or amount O, whichever is less		/3 = S
Amount to be included in income (amount S plus amount T) (enter this amount on line 10		
, , , , , , , , , , , , , , , , , , , ,		

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SHAREHOLDER INFORMATION

SCHEDULE 50

_	_	•	•	_	_	-	_		•	•
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LEAN SOFTWARE SERVICES, INC. CRA Business #858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:31 AM

Name of corporation	Business Number	Tax year-end
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	2 0 1 6 1 2 3 1

All private corporations must complete this schedule for any shareholder who holds 10% or more of the corporation's common and/or preferred shares.

	Provide				
Name of shareholder (after name, indicate in brackets if the shareholder is a corporation, partnership, individual, or trust)	Business Number (If a corporation is not registered, enter "NR")	Social insurance number	Trust number	Percentage common shares	Percentage preferred shares
100	200	300	350	400	500
BJORN LARSON - IN TRUST		464 375 294	a ver	73.000	
EZRIEL REICHMAN	•••	NA		20.000	
				*	

10.

*

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BALANCE SHEET INFORMATION

Schedule 100

Assets	Code	Current year	Prior year
Cash and deposits	1000		
Cash	1001	2,473,323	842,66
Accounts Receivable	1060	361,300	513,3
oans and notes receivable	1240	8,500	191,48
Machinery, equipment, furniture and fixtures		20,200	191,40
Vacuumility, equipment, furniture and fixtures	1740	30,383	20,82
Accumulated amortization of machinery, equipment, furniture and fixtures	1741	(10,278)	(6,44
ncorporation costs	2018	2,640	2,64
Research and development	2026	974,978	1,722,97
Due from / investment in related parties - long-term assets	2240	598,832	422,98
Short term investments	1180	300,000	700,00
Prepaid expenses	1484	5,331	
Computer equipment / software	1774	29,546	
Accumulated amortization of computer equipment / software	1775	(8,125)	
noothinated amortization of computer equipment / software	1775	(0,120)	
			~
MA			
The state of the s			
otal assets	2599	4,766,430	4,410,44

Liabilities	Code	Current year	Prior year
Bank overdraft	2600		
Amounts payable and accrued liabilities Taxes payable Deferred income - shown current	2620	29.430	79.694
Taxes payable	2680	73.143	51,433
Deferred income - shown current	2620 2680 2770	29,430 73,143 344,005	79,694 51,433 372,637
deria .		-	
	-		
• • •			
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7			
otal liabilities	3499	446,578	503,764

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LEAN SOFTWARE SERVICES, INC. CRA Business #858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:33 AM

Equity	Code	Current year	Prior year
Common shares	3500	745,000	745,000
Retained earnings / deficit	3600	3,574,852	3,161,680
Total equity	3620	4,319,852	3,906,680
Total liabilities and equity	3640	4,766,430	4,410,444

Retained earnings	Code	Current year	Prior year
Retained earnings/deficit-start	3660	3,161,680	2,850,673
Net income / loss *	3680	413,172	311,007
Total retained earnings	3849	3,574,852	3,161,680

^{*} The amount on line 3680 must equal the amount on line 9999 of S125 or S140 without considering line 9998.



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INCOME STATEMENT INFORMATION

Schedule 125

Operating name, if different from the corporations' legal name		
0001	4.	
Description of operation, if filing multiple Schedules 125		
0002		
Sequence number		
0003		

Income Statement Information	Code	Current year	Prior year
Total sales of goods and services	8089		
Total revenue	8299	3,373,784	2,171,178
Cost of sales	8518		
Gross profit / loss (item 8089 - item 8518)	8519	-	
Total operating expenses	9367	2,887,469	1,808,738
Total expenses	9368	2,887,469	1,808,738
Net non-farming income	9369	486,315	362,440
Total farm revenue	9659		
Total farm expenses	9898		
Net farm income	9899		
Net income / loss before taxes and extraordinary items	9970	486,315	362,440

Other comprehensive income

Revaluation surplus	7000	
Defined benefit gains/losses	7002+	
Foreign operation translation gains/losses	7004+	
Equity instruments gains/losses	7006+	-\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Cash flow hedge effective portion gains/losses	7008+	
Income tax relating to components of other comprehensive income	7010+	
Miscellaneous other comprehensive income	7020+	
Total - Other comprehensive income	=	76

Summary

Complete this section if only one Schedule 125 is filed, Schedule 140 is used to summarize the information from multiple Schedules 125.

Extraordinary items	9975-		
Legal settlements	9976-		
Unrealized gains / losses	9980+		
Unusual items	9985-		
Current income taxes	9990-	73,143	51,433
Future income tax provision	9995-		1004
Total - Other comprehensive income	9998+		
Net income / loss after taxes and extraordinary items	9999=	413,172	311,007

Revenue	Code	Current year	Prior year
Trade sales of goods and services	8000		
	4		· ·
	•		
Total sales of goods and services	9090		
Total sales of goods and services Foreign exchange gains / losses Consulting fees nvestment revenue	8089 8231	(OF 677)	00.07
Poreign exchange gains / losses	6231	(25,677) 3,390,723 8,738	89,97 2,080,92 27
Consulting tees	8241 8090	3,390,723	2,080,92
nvestment revenue	8090	8,738	27
Total revenue			
COTAL POVONUO	8299	3,373,784	2,171,17

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed; 5/15/2017 11:11:35 AM

8670	11,957	1,720
		1,12
8690	39,695	18,64
	3,772	3,39
	754,081	299,238
	53,331	43,40
	1,765,400	1,260,188
8910	71,821	27,410
9200	63,396	24,43
9225	15,333	18,96
	15,444	11,502
8590	58,774	98,688
8521	34,465	1,15
+		
	8710 8810 8862 8863 8910 9200 9225 8523 8590 8521	8710 3,772 8810 754,081 8862 53,331 8863 1,765,400 8910 71,821 9200 63,396 9225 15,333 8523 15,444 8590 58,774

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:30 AM

Canada Revenue Agency

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Schedule 141 Code 1002 Protected B when completed

Notes Checklist

Corporation's name	Business number	T			Гах у	ar-en			. "
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	2	0	ear 1	6	Mon!	2	Day 3	1

- · Parts 1, 2, and 3 of this schedule must be completed from the perspective of the person (referred to in these parts as the accountant) who prepared or reported on the financial statements. If the person preparing the tax return is not the accountant referred to above, they must still complete Parts 1, 2, 3, and 4, as applicable.
- For more information, see Guide RC4088, General Index of Financial Information (GIFI) and T4012, T2 Corporation Income Tax Guide.

 Complete this schedule and include it with your T2 return along with the other GIFI schedules. 	
— Part 1 – Information on the accountant who prepared or reported on the financial statements ————————————————————————————————————	_
Does the accountant have a professional designation?	
Is the accountant connected* with the corporation?]
Note If the accountant does not have a professional designation or is connected to the corporation, you do not have to complete Parts 2 and 3 of this schedule However, you do have to complete Part 4, as applicable.).
* A person connected with a corporation can be: (i) a shareholder of the corporation who owns more than 10% of the common shares; (ii) a director, an officer, or an employee of the corporation; or (iii) a person not dealing at arm's length with the corporation.	
— Part 2 – Type of involvement with the financial statements ————————————————————————————————————	
Choose the option that represents the highest level of involvement of the accountant:	
Completed an auditor's report1	
Completed a review engagement report	1
Conducted a compilation engagement	
— Part 3 – Reservations —	_
Lait 2 - Vesti Adriotis	\neg
If you releated entire 4 or 2 under Targe of investment with the financial statements above appared to following question.	- 1
If you selected option 1 or 2 under Type of involvement with the financial statements above, answer the following question:	,
If you selected option 1 or 2 under Type of involvement with the financial statements above, answer the following question: Has the accountant expressed a reservation? 2 No]
]
Has the accountant expressed a reservation?	
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1	
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options:	
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) 1	Protectional
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) Prepared the tax return and the financial information contained therein (financial statements have not been prepared)	Perceitannel
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) Prepared the tax return and the financial information contained therein (financial statements have not been prepared) Were notes to the financial statements prepared? 101 1 Yes 2 No X	Provident of the Control of the Cont
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) Prepared the tax return and the financial information contained therein (financial statements have not been prepared) Were notes to the financial statements prepared? 101 1 Yes 2 No X If yes, complete lines 104 to 107 below:	Protected Protecting
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) Prepared the tax return and the financial information contained therein (financial statements have not been prepared) Were notes to the financial statements prepared? If yes, complete lines 104 to 107 below: Are subsequent events mentioned in the notes?	
Has the accountant expressed a reservation? Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) 1 Prepared the tax return and the financial information contained therein (financial statements have not been prepared) 2 Were notes to the financial statements prepared? 101 1 Yes 2 No X If yes, complete lines 104 to 107 below: Are subsequent events mentioned in the notes? 104 1 Yes 2 No Is re-evaluation of asset information mentioned in the notes? 105 1 Yes 2 No Is re-evaluation of asset information mentioned in the notes? 106 If Yes 107 No Is re-evaluation of asset information mentioned in the notes? 107 No Is re-evaluation of asset information mentioned in the notes? 108 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the notes? 109 No Is re-evaluation of asset information mentioned in the	Normal Lead Institut
Has the accountant expressed a reservation? 2 No Part 4 – Other information If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: Prepared the tax return (financial statements prepared by client) 1 Prepared the tax return and the financial information contained therein (financial statements have not been prepared) 2 Were notes to the financial statements prepared? 101 1 Yes 2 No X If yes, complete lines 104 to 107 below: Are subsequent events mentioned in the notes? 105 1 Yes 2 No Is re-evaluation of asset information mentioned in the notes? 106 1 Yes 2 No Is contingent liability information mentioned in the notes? 106 1 Yes 2 No Is contingent liability information mentioned in the notes? 107 1 Yes 2 No Is contingent liability information mentioned in the notes? 108 1 Yes 2 No Is contingent liability information mentioned in the notes? 108 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is contingent liability information mentioned in the notes? 109 1 Yes 2 No Is continued to the notes? 109 1 Yes 2 No Is continued to the notes? 109 1 Yes 2 No Is continued to the notes? 109 1 Yes 2 No Is continued to the notes? 109 1 Yes 2 No Is co	Transfer females from the females from t



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— Part 4 – Other Information (continued) ———				Olecte	JU D W	len com	hieren
— Part 4 – Other Information (continued) ———						·	
Impairment and fair value changes							
In any of the following assets, was an amount recognized of an impairment loss in the tax year, a reversal of an impafair value during the tax year?	airment loss recognized in a previou	s tax year, or a change in	200	1 Yes		2 No [
If yes, enter the amount recognized:	In net Income increase (decrease)	In OCI Increase (decrease)					
Property, plant, and equipment		211	8				
Intangible assets	215	216	3				
Investment property							
Biological assets	225	-					
Financial instruments	230	231	f				
Other	235	236	ē		0		
Financial Instruments						_	
Did the corporation derecognize any financial instrument(s	s) during the tax year (other than tra	de receivables)?	250	1 Yes		2 No	
Did the corporation apply hedge accounting during the tax	year?		255	1 Yes		2 No [
Did the corporation discontinue hedge accounting during t	he tax year?		260	1 Yes		2 No [
Adjustments to opening equity							
Was an amount included in the opening balance of retaine change in accounting policy, or to adopt a new accounting	ed earnings or equity, in order to constandard in the current tax year?	rect an error, to recognize a	265	1 Yes		2 No [
If yes, you have to maintain a separate reconciliation.							
			_	_			_



Agence du revenu du Canada

Schedule 500 Protected B when completed

Ontario Corporation Tax Calculation

Corporation's name	Business number	Tax year-end	
		Year Month Day	
LEAN SOFTWARE SERVICES, INC.	85847 8530 RC 0001	2 0 1 6 1 2 3 1	

- Use this schedule if the corporation had a permanent establishment (as defined in section 400 of the federal Income Tax Regulations) in Ontario at any time in the tax year and had Ontario taxable income in the year.
- · All legislative references are to the federal Income Tax Act and Income Tax Regulations.
- This schedule is a worksheet only. You do not have to file it with your T2 Corporation Income Tax Return.

Part 1 – Ontario basic rate of tax for the year			E.	
Ontario basic rate of tax for the year	85 C87 * * * * * * * * * * * * * * * * * * *	*************************		11.5 % A

	Part 2 – Calculation of Ontario basic income tax ———————————————————————————————————		
	Ontario taxable income *	498,655	В
	Ontario basic income tax: amount B multiplied by Ontario basic rate of tax for the year (rate A from Part 1)	57,345	С
	If the corporation has a permanent establishment in more than one jurisdiction, or is claiming an Ontario tax credit in addition to Ontario basic income tax, or has Ontario corporate minimum tax or Ontario special additional tax on life insurance corporations payable, enter amount C on line 270 of Schedule 5, Tax Calculation Supplementary – Corporations. Otherwise, enter it on line 760 on page 8 of the T2 return.		
I	* If the corporation has a permanent establishment only in Ontario, enter the amount from line 360 or line Z, whichever applies, from page 3		

of the T2 return, Otherwise, enter the taxable income allocated to Ontario from column F in Part 1 of Schedule 5.



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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:33 AM

Complete this part if the corporation claimed the federal small business deduction under subsection 125(1) or would have claimed it if subsection 125(5.1) had not been applicable in the tax year.
Income from active business carried on in Canada (amount from line 400 of the T2 return)
Federal taxable income, less adjustment for foreign tax credit (amount from line 405 of the T2 return) 498,655 2
Federal business limit before the application of subsection 125(5.1) (amount from line 410 of the T2 return)
Ontario business limit reduction:
Amount from line 3
Deduct:
Amount from line E on page 4 of the T2 return Number of days in the tax year after May 1, 2014 Number of days in the tax year after May 1, 2014 Number of days in the tax year 366
Business limit the CCPC assigns under subsection 125(3.2)
Reduced Ontario business limit (amount a minus amount b minus amount c) (if negative, enter "0") 500,000
Enter the least of amounts 1, 2, 3, and 4
Ontario domestic factor (ODF): Ontario taxable income * 498,655 = 1.00000 E Taxable income earned in all provinces and territories ** 498,655
Amount D × ODF (line E)489,917 -c
Amount D x ODF (line 2)
Ontario taxable income (amount B from Part 2) 498,655 d
Ontario small business income (lesser of amount c and amount d)
OSBD rate for the year
Ontario small business deduction: amount F multiplied by rate G
* Enter amount B from Part 2.
** Includes the offshore jurisdictions for Nova Scotia and Newfoundland and Labrador,

Part 4 – Ontario adjusted small business income
Complete this part if the corporation was a Canadian-controlled private corporation throughout the tax year and is claiming the Ontario tax credit for manufacturing and processing or the Ontario credit union tax reduction.
Ontario adjusted small business income (lesser of amount D and amount d from Part 3)
Enter amount I on line K in Part 5 of this schedule or on line B in Part 2 of Schedule 502, Ontario Tax Credit for Manufacturing and Processing, whichever applies.

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LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11;11:33 AM

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Part 5 - Calculation of credit union tax reduction ————————————————————————————————————	
Complete this part and Schedule 17, Credit Union Deductions, if the corporation was a credit union throughout the tax year,	
Amount D from Part 3 of Schedule 17	•
Deduct:	
Ontario adjusted small business income (amount I from Part 4)	
Subtotal (amount J minus amount K) (if negative, enter "D") L	
Amount L multiplied by rate G from Part 3	M
Ontario domestic factor (line E from Part 3)	1.00000 N
Ontario credit union tax reduction (amount M multiplied by ODF from line N)	0
Enter amount O on line 410 of Schedule 5.	

LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:36 AM



Canada Revenue Agency Agence du revenu

SCHEDULE 550 Code 0902

ONTARIO CO-OPERATIVE EDUCATION TAX CREDIT

- Use this schedule to claim an Ontario co-operative education tax credit (CETC) under section 88 of the Taxation Act, 2007 (Ontario).
- The CETC is a refundable tax credit that is equal to an eligible percentage (10% to 30%) of the eligible expenditures incurred by a
 corporation for a qualifying work placement. The maximum credit amount is \$1,000 for each qualifying work placement ending before
 March 27, 2009, and \$3,000 for each qualifying work placement beginning after March 26, 2009. For a qualifying work placement that
 straddles March 26, 2009, the maximum credit amount is prorated.
- Eligible expenditures are salaries and wages (including taxable benefits) paid or payable to a student in a qualifying work placement, or
 fees paid or payable to an employment agency for services performed by the student in a qualifying work placement. These expenditures
 must be paid on account of employment or services, as applicable, at a permanent establishment of the corporation in Ontario.
 Expenditures for a work placement (WP) are not eligible expenditures if they are greater than the amounts that would be paid to an arm's
 length employee.
- A WP must meet all of the following conditions to be a qualifying work placement:
 - the student performs employment duties for a corporation under a qualifying co-operative education program (QCEP);
 - the WP has been developed or approved by an eligible educational institution as a suitable learning situation;
 - the terms of the WP require the student to engage in productive work;
 - the WP is for a period of at least 10 consecutive weeks or, in the case of an internship program, not less than 8 consecutive months and not more than 16 consecutive months:
 - the student is paid for the work performed in the WP;
 - the corporation is required to supervise and evaluate the job performance of the student in the WP:
 - the institution monitors the student's performance in the WP; and
 - the institution has certified the WP as a qualifying work placement.
- Make sure you keep a copy of the letter of certification from the Ontario eligible educational institution containing the name of the student, the employer, the institution, the term of the WP, and the name/discipline of the QCEP to support the claim. Do not submit the letter of certification with the T2 Corporation Income Tax Return.
- · File this schedule with the T2 Corporation Income Tax Return.

Part 1 - Corporate information

110 Name of person to contact for more information STEPHEN ROSENBERG	120 Telephone number including area (416) 798-4997	code
Is the claim filed for a CETC earned through a partnership?*	150 1 <u>Yes</u> 2 1	<u>√</u> o 🔀
If you answered yes to the question at line 150, what is the name of the partnership?		
Enter the percentage of the partnership's CETC allocated to the corporation	170	%
* When a corporate member of a partnership is claiming an amount for eligible		mplete a
Schedule 550 for the partnership as if the partnership were a corporation. Ea a separate Schedule 550 to claim the partner's share of the partnership's CE the partnership's CETC.	ich corporate partner, other than a limited pa TC. The allocated amounts can not exceed t	irtner, should file the amount of
a separate Schedule 550 to claim the partner's share of the partnership's CE	ich corporate partner, other than a limited pa TC. The allocated amounts can not exceed t	irtner, should file the amount of
a separate Schedule 550 to claim the partner's share of the partnership's CE the partnership's CETC.	TC. The allocated amounts can not exceed t	the amount of
a separate Schedule 550 to claim the partner's share of the partnership's CE the partnership's CETC. Part 2 - Eligibility	TC. The allocated amounts can not exceed to ear?	the amount of



corporation's salaries and wa	iges paid in the p	revious tax year*		300	366,670
For eligible expenditures in	curred before Ma	rch 27, 2009:			
- If line 300 is \$400,000 or I - If line 300 is \$600,000 or I - If line 300 is more than \$4	more, enter 10%	on line 310	ercentage on line 310	using the following for	mula:
	**	amount on l	ne 300		
Eligible percentage =	15 % -	5 % x (minus	400,000)	
	L	4	200,000		
ligible percentage for dete	rmining the elig	ible amount		310	15.000 %
For eligible expenditures in	curred after Marc	h 26, 2009:			
- If line 300 is \$400,000 or I - If line 300 is \$600,000 or r - If line 300 is more than \$4	nore, enter 25%	on line 312	ercentage on line 312	using the following for	mula;
	41	amount on I	ne 300		
Eligible percentage =	30 % -	5 % x (minus	400,000)	
	L		200,000		
ligible percentage for dete	empinion the elic	ible amount		312	30.000 %

LEAN SOFTWARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:36 AM

Part 4 - Calculation of the Ontario co-operative education tax credit

Complete a separate entry for each student for each qualifying work placement that ended in the corporation's tax year. If a qualifying work placement would otherwise exceed four consecutive months, divide the WP into periods of four consecutive months and enter each full period of four consecutive months as a separate WP. If the WP does not divide equally into four-month periods and if the period that is less than 4 months is 10 or more consecutive weeks, then enter that period as a separate WP. If that period is less than 10 consecutive weeks, then include it with the WP for the last period of 4 consecutive months. Consecutive work placements with two or more associated corporations are deemed to be with only one corporation, as designated by the corporations.

A	Name of qualifying co-operative education program			
Name of university, college, or other eligible educational institution 400				
1 UNIVERSITY OF WATERLOO	ELECTRICAL ENGINEER	RING		
2 SHARIDAN COLLEGE				
С	D	E		
Name of student	Start date of WP (see note 1 below)	End date of WP (see note 2 below)		
410	430	435		
1 BARAL DIBAS	2016/01/25	2016/05/06		
2 SHASHAANK SRINIVASAN	2016/05/05	2016/09/09		

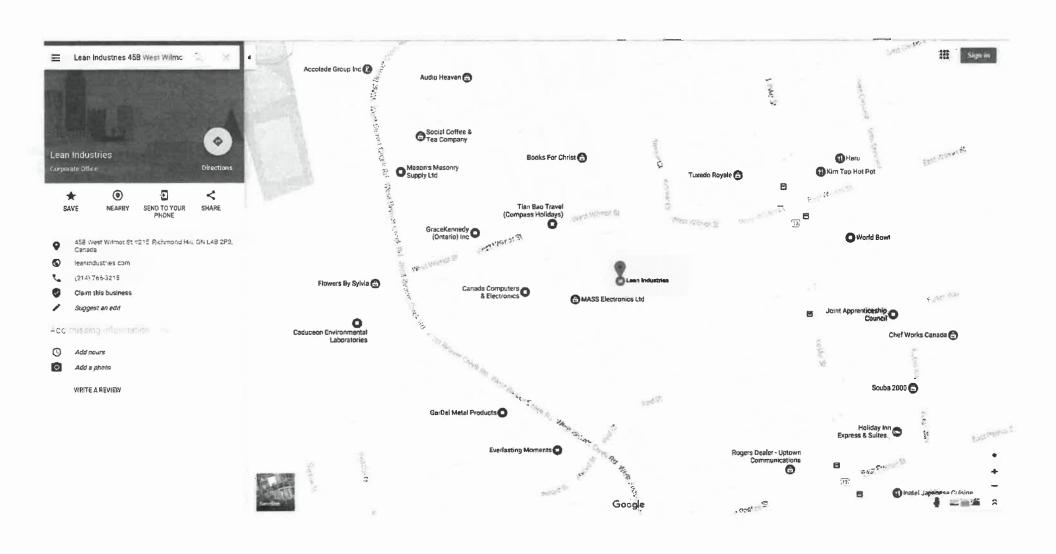
Note 1: When the WP has been divided into separate periods because it exceeds four consecutive months, enter the start date for the separate WP.

Note 2: When the WP has been divided into separate periods because it exceeds four consecutive months, enter the end date for the separate WP.

	F1	F2	G	Н
	Eligible expenditures before March 27, 2009 (see note 1 below)	Eligible expenditures after March 26, 2009 (see note 1 below)	Eligible amount (eligible expenditures multiplied by eligible percentage) (see note 2 below)	Maximum CETC per WP (see note 3 below)
	450	452	460	462
1		8,654		3,000
2		7,108	2,132	3,000
\dashv			J	К
		CETC on eligible expenditures (column G or H, whichever is less)	CETC on repayment of government assistance (see note 4 below)	CETC for each WP (column I or column J)
		470	480	490
1		2,596		2,596
2		2,132		2,132
	Ontario co-	pperative education tax credit (to	otal of amounts in column K) 500	4,728

EAN SOFTV	ARE SERVICES, INC. CRA Business # 858478530 Year-end: 2016/12/31 Printed: 5/15/2017 11:11:36 AM
or, if the	corporation answered yes at line 150 in Part 1, determine the partner's share of amount L:
Amount	4,728 x percentage at line 170 in Part 1 % = M
	nount L or M, whichever applies, on line 452 of Schedule 5, Tax Calculation Supplementary – Corporations. If you are filing more Schedule 550, add the amounts from line L or M, whichever applies, on all the schedules and enter the total amount on line 452 ule 5.
Note 1	Reduce eligible expenditures by all government assistance, as defined under subsection 88(21) of the Taxation Act, 2007 (Ontario), that the corporation has received, is entitled to receive, or may reasonably expect to receive, for the eligible expenditures, on or before the filing due date of the T2 Corporation Income Tax Return for the tax year.
Note 2	Calculate the eligible amount (Column G) using the following formula: Column G = (column F1 x percentage on line 310) + (column F2 x percentage on fine 312)
Note 3	If the WP ends before March 27, 2009, the maximum credit amount for the WP is \$1,000. If the WP begins after March 26, 2009, the maximum credit amount for the WP is \$3,000. If the WP begins before March 27, 2009 and ends after March 26, 2009, calculate the maximum credit amount using the following formula: (\$1,000 x X/Y) + [\$3,000 x (Y - X)/Y]
	where "X" is the number of consecutive weeks of the WP completed by the student before March 27, 2009, and "Y" is the total number of consecutive weeks of the student's WP.
Note 4	When claiming a CETC for repayment of government assistance, complete a separate entry for each repayment and complete columns A to E and J and K with the details for the previous year WP in which the government assistance was received. Include the amount of government assistance repaid in the tax year multiplied by the eligible percentage for the tax year in which the government assistance was received, to the extent that the government assistance reduced the CETC in that tax year.

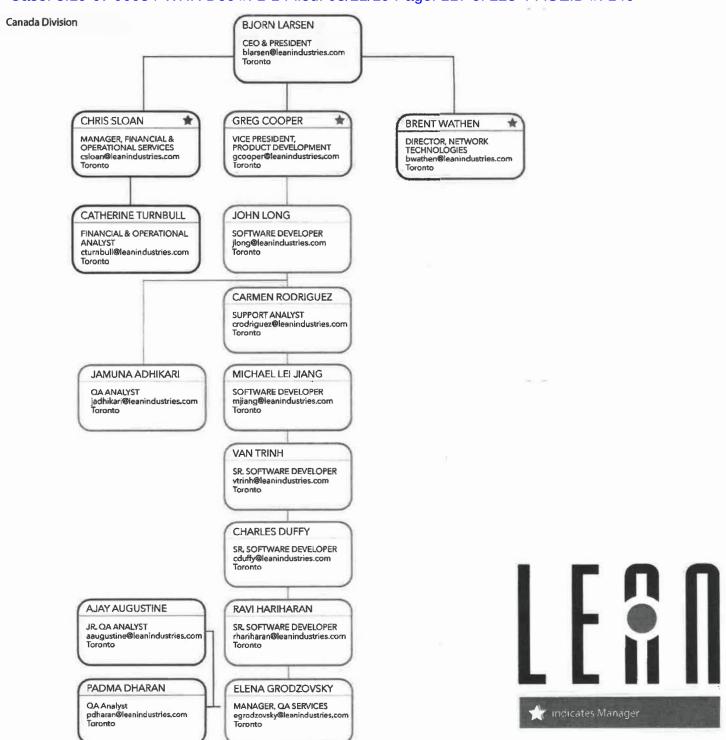
Exhibit H



Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 116 of 223 PAGEID #: 145

Exhibit I

Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 117 of 223 PAGEID #: 146

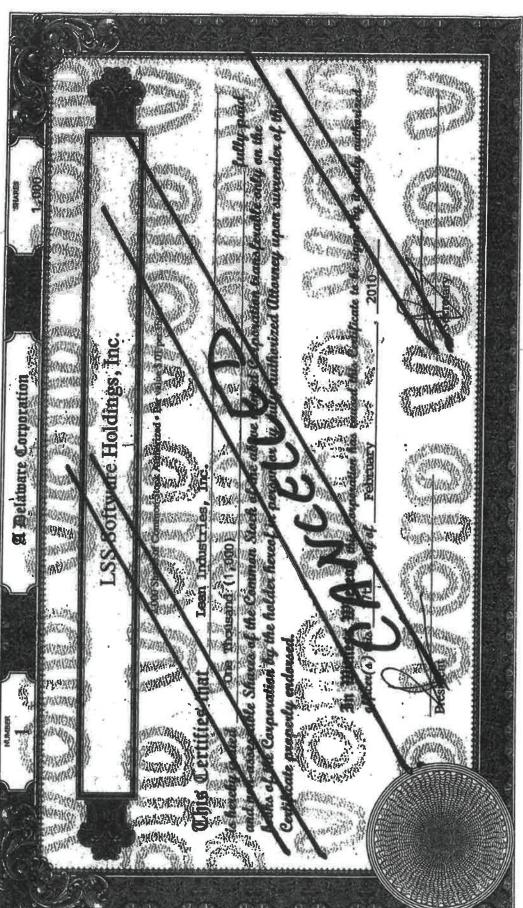


Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 118 of 223 PAGEID #: 147

Exhibit J

transferred i.ssue 13, 2012 of Original No. of Shares Shares Transferred		Yes and yes a second and a second a second and a second and a second and a second and a second a
From whom transferred original issue Date July 13, 2012 No. Original No. of Original Shares 2 1,000	1,000 in the most	
Received Certificate No. 2 For 1,000 Shares on July 13 , 2012	oldings line 1250	
Jares	SS Software Hamon Software Hamon Software Services Management of the different of the diffe	
For SI	fight Lean One Shouse of the Congression of the Con	The Witness Williams
CERTIFICATE No. 2 Issued to Lean Software Date July 13, 2012		
CERTIFIC Issued to		

From whom transferred	Oxiginal issue Date February 17, 2010	No. Original No. of Original No. of Starts Cortificate Shares Triansferred 1 1,000	SERVISE	TO SERVICE OF THE PROPERTY OF	STATE OF
Received Certificate No. 1	For 1,000 Shares on February 17 2010		A Belaware Corvoration		Software Holdings, Inc.
TE No. 1 ForShares	Lean Industries, Inc.	February 17, 2010	MANDER		LSS
) CERTIFICATE No. 1	Issued to	Date		and the state of t	And I



Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 121 of 223 PAGEID #: 150

Exhibit K

Starte of Delenace Secretary of State Division of Compositions Delivered 04:42 Mt 01/08/2010 FILED 04:38 Mt 01/08/2010 SRV 100023419 - 4775151 FILE

STATE of DELAWARE CERTIFICATE of INCORPORATION A STOCK CORPORATION

•	Second: its registered office in the State of Delaware is to be located at 3411 silvers to most notice building \$164 State in the City of Wilmington	
	Country of New Castle Zip Code 19810 The registered agent in charge thereof is Corporate Creations National Englishment	
	Third: The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delawase.	.,
	Fourth: The amount of the total stock of this corporation is stationized to there is 2.000 theres (number of authorized shares) with a par value of 2.01 per share.	
	Fifth: The name and mailing address of the incorporator are as follows: Nume Corporato Creations International, Inc. Mailing Address 11380 Prospecity Farms Rd. #2218	
	Pala Seach Gardens Florida Zip Code 32610	
	L. The Undersigned, for the purpose of forming a corporation under the laws of the State of Delaware, do make, file and record this Certificate, and do certify that the facts herein stated are true, and I have secondingly hereinto set thy hand this 8th day of January	
	BY: Valled brees	
	NAME Value of the Constant International	I
	(type or print)	
	A STATE OF THE STA	

V. S. Stere

PILED 01:39 PM 06/04/2012 120699309 - 4775151 FILE

STATE OF DELAWARE RENEWAL AND REVIVAL

88 SOFTWARE HOLDINGS, INC.

LSS SOFTWARE HOLDINGS, INC., a corporation organized under the laws of Delaware, the Certificate of incorporation of which was filed in the office of the Secretary of State on the 8" day of January, 2010, the charter of which was voided for failure to pay its Franchise Tex now desires to produce a restoration, renewal and revival of its charter, and hereby certifies as follows:

- 1. The name of the corporation is LSS SOFTWARE HOLDINGS, INC.
- 2. its registered office in the State of Delaware is located at 1201 Change Street, Suits 600; City of Wilmington, New Cestle County, Delaware 19801 the name and address of its registered agent is Agents and Corporations, Inc., 1201 Orange Street, Suite 800, City of Wilmington. New Castle County, Delaware 19801.
- The date when restoration, renewal, and revival of the charter of this company is to commence is the 20th day of February, 2012, same 3. being prior to the date of the expiration of the charter. This renewal and revival of the charter of this corporation is to be perpetual.
- 4. This corporation was duty organized and carried on the business authorized by its charter until the 1st day of March, 2012, at which time its charter became inoperative and void for failure to pay its Franchise Tax and this certificate of renewal and revival is filed by authority of the dully elected directors of the corporation in accordance with the laws of the State of Delaware.

IN TESTIMONY WHEREOF, and in compliance with the provisions of Section 312 of the General Corporation Law of the State of Delaware, as amended, providing for the renewal, extension and restoration of charters, the last and acting authorized officer hereunto set his/her hand to this certificate the 10th day of May, 2012

LSS SOFTWARE HOLDINGS, INC.

Name: a orn Karsen

Exhibit L

Form		1120		1		U	S. C	orporati	on inc	ome	Tax	Retu	rn			OMB No	, 1545-0123
Depa		t of the Treas		"	for calendar	year 2016 or tax ormation abou	year be	ginning 1120 and its	s separate	Instru	tions i	s at w	ng ww.irs.gov/l	orm112		20	016
1a (check consoli attach	itfo dated return Form 851)	(See		Name	S Soft								E	3 Employ	er identification	number
b L	.ife/nor lated r	rife consoli-		TYPE	Numbe	r, street, and room	n or suite	no. If a P.O. b	ox. see instr	uctions.	_	-		— 7	Date In	corporated	
2 1	ersona attach	al holding co. Sch. PH)		OR	15	9 Linw				-					01/08	/2010	
3 F	BISON	al service constructions)		PRIN	City or	town, state, or pro	ovince, c	cuntry, and ZIP	or foreign po	ostal code				2	Total as	ssets (see Instru	cilons)
		le M-3 attache		1	Bu	ffalo			N	Y 1	1209						
												-			\$	- 8	65,705
_	_			E Ch	eck If: (1)	Initial return	(2)	Final return	(3)	Name cha	inge (4)	1	ddress change				
	18	Gross re		_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4.000.00		*******	*****	1a		2,835	,938			
	þ	Returns	and allow	wances		************		*********			1b		5	,448			
	٥	: Balance	Subtract	i line 70	from line	1a									1c	2,8	30,490
	2	Cost of	goods so	io (aliac	n ronn 1	123-A)									4		
	3	Gross p	rofit. Subl	ract line	2 from III	ne 1c									3	2,8	30,490
욛	4	Dividend	s (Sched	ule C, li	ne 19)								,,,,,,,,,,,		4		
псоте	5	Interest							* - 4 7 4 - 7 7 7 7	******		******		*,,,,,,,	5		3,000
Ξ	6	Gross n	ents	*								******	*********	7111777	6		
	7	Gross n	yalties .		2.4					******		******			7		
	8	Capital	gain net i	ncome (attach Sc	hedule D (Fó	m 112	20)}		S 400 - 23 -			411200 000		8		
	9	Net gair	or (loss)	from Fo	om 4797,	Part II, line 1	17 (atta	sch Form 47	97)				10.1		9		
	10	Other in	come (se	e instru	ictions—a	ttach stateme	ent)				*****	See	Stmt	1	10		1,144
_	11	Total in	come. A	dd lines	3 through	10				SV 85 4045				-	11	2,8	34,634
	12	Comper	sation of	officers	(see inst	ructions atta	ich Fo	rm 1125-E)							12		
·	13	Salaries	and wag	es (less	employm	ent credits)		**********		******				*****	13	7	16,171
jon.	14	Repairs	and mair	ntenance	9			*********			** * * * * * * *	. 2:			14		2,692
달	15	Bad deb	ts						*********						15		
8	16	Rents			******										16		31,900
5	17	Taxes a	nd licens	es	******			***********							17		59,041
2	18	Interest													18		
욻	19	Charitab	le contrit	outions											19		
Ē	20	Deprecia	ation from	Form 4	1562 not o	laimed on Fo	m 11	25-A or else	where on	return	(attacl	h Form	4562)		20		13,936
5	21	Depletio	n			*****									21		
25	22	Advertis				**********									22		1,666
ફ	23	Pension	profit-sh	aring, e	tc., plans										23		
(See instructions for limitations on deductions.)	24	Employe	e benefil	prograi	ms										24		91,225
2.	25	Domesti	c product	ion activ	vities ded	uction (attach t)	Form	8903)					*********	******	25		
8	26	Other d	eductions	(attach	statemen	t)	4		*******			See	Stmt	2	26		84,812
	27	Total d	ductions	s. Add (i	nes 12 th	rough 26	******					,			27		01,443
ctions	28	Tayable	income h	refore n	et operatio	na loss deduc	tion at	nd special d	leductions	Subtr	act line	27 fre	m line 11		28	3	33,191
	298	a Net ope	rating los	s deduc	tion (see	instructions)				*****	29a		333	,191	100		
Ded	b	Special	deduction	s (Sche	dule C, li	ne 20)		****			29b				4976		
_	C	Add line			********			Carrier and Andrews		and a					29c	3	33,191
200	30					from line 28									30		0
Refundable Credits, and Payments	31	Total tax	(Schedu	ile J, Pa	rt I, line 1	1)		· · · · · · · · · · · · · · · · · · ·				416.4 - 7 414		*****	31		0
9	32	Total pa	yments a	nd refur	ndable cre	dits (Schedul	e J, Pa	art II, line 21	1)						32		
Pag	33	Estimate	d tax per	naity. Se	e instruct	ions. Check i	f Form	2220 is att	ached						33		
a at	34					than the tota								******	34		
Tæ,	35				_	nan the total				nount o	verpaid	1			35		
	36					t: Credited t						4 14 17		nded	- Au		
0:	- 1	Under penaltic and belief, it is	s of perjury, true, correct	declare to and comp	at I have exa- lete. Declarati	mined this return, I on of preparer (oth	ncluding a ver than t	accompanying sci axoaver) is based	thedules and ¢ d on all inform	statement nation of v	thich prep	the best o	i my knowledge any knowledge.	,		uss this return with	The second secon
Si						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								show		e Instructions.	Yes No
He	re	_											— b -	Pres	ident		
_			ture of office		orn L	arsen	1.				Date		Т	itle		P	
			nt/Type prej			an.		sparer's signatu					Date	/17		FTIN PTIN	707000
Pai				L J.	Dansa			ichael		nsa,	CPA		04/14/	1/	self-employ		797026
	par		m's name	-				rata L	TIE.						Firm's EIN	P 10-1	382528
US	e O	nly Fi	m's address			1 Dela		a Ave			1.400	12			Phone no.	042-204	20
Per s	anar.	vork Reducti	no Act Note	C6. S00 90		ffalo,	MI				1420	12			110-1	842-390	m 1120 (2016)
DAA	-Armis	- 2111 - 4440000		, 00	person med											- 01	(-5.0)

Schedule C Dividends and Special Deductions (see instructions)	(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed			
stock) 2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed		70	
stock)		80	
1		see	
3 Dividends on debt-financed stock of domestic and foreign corporations		Instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Total. Add lines 1 through 8. See instructions for limitation			
10 Dividends from domestic corporations received by a small business investment	of as a		
company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, or 12			
Income from controlled foreign corporations under subpart F (attach Form(s) 5471)		9.5	
5 Foreign dividend gross-up			
6 IC-DISC and former DISC dividends not included on line 1, 2, or 3			
7 Other dividends			
8 Deduction for dividends paid on certain preferred slock of public utilities			
9 Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4		- 510	
Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29	9b		

	1120 (2016) LSS Software Holdings, Inc and Sub 45-4456934		Page	3
	thedule J Tax Computation and Payment (see instructions)			
Parl	Hax Computation			_
1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions 👂 🗌			
2	Income tax. Check if a qualified personal service corporation. See instructions	2		0
3	Alternative minimum tax (attach Form 4626)	3		
4	Add lines 2 and 3	4		0
5a	Foreign tax credit (attach Form 1118)	1000		
b	Credit from Form 8834 (see instructions) 5b	9112		
C	General business credit (attach Form 3800)	156		
d	Credit for prior year minimum tax (attach Form 8827)	13.6		
0	Bond credits from Form 8912	(180)		
6	Total credits. Add lines 5a through 5e	6		_
7	Subtract line 6 from line 4	7		
8	Personal holding company tax (attach Schedule PH (Form 1120))	8		
9a	Recapture of investment credit (attach Form 4255)	53000		
b	Recapture of low-income housing credit (attach Form 8611) 9b			
C	interest due under the look-back method—completed long-term contracts (attach	73 B		
	Form 8697) 9c	0.00		
d	Interest due under the look-back method—income forecast method (attach Form			
	8866) 9d			
8	Alternative tax on qualifying shipping activities (attach Form 8902)	1975		
f	Other (see instructions—attach statement)			
10	Total. Add lines 9a through 9f	10		
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11		0
	II-Payments and Refundable Credits	7.0		_
12	2015 overpayment credited to 2016	12		_
13	2016 estimated tax payments			_
14	2016 refund applied for on Form 4466	14 (_
15	Combine lines 12, 13, and 14			_
16	Tax deposited with Form 7004	16		_
17	Withholding (see instructions)	17		_
18	Total payments. Add lines 15, 16, and 17	18		_
19	Refundable credits from:	10		_
a	Form 2439	4.50		
_		- 488		
Ь	Form 4136	-		
C	Form 8827, line 8c 19c	-		
d	Other (attach statement-see instructions)			
20	Total credits. Add lines 19a through 19d			_
21	Total payments and credits. Add lines 18 and 20. Enter here and on page 1, line 32.	21		_
30	hedule K Other Information (see instructions)		J. J.	_
1	Check accounting method: a ☐ Cash b 🗶 Accrual c ☐ Other (specify) ▶	*********	Yes ?	4D
2	See the instructions and enter the:		18.1	
a	Business activity code no. ▶ 541519	********		
b	Business activity > Other Computer Services			
C	Product or service ➤ Software Distributor			37
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?			X
	if "Yes," enter name and EIN of the parent corporation ▶			
4	At the end of the tax year:			
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt	t		
	organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes		(6)	
	corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)	*****	x	
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting pow			M
	classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Sched	ule G)		$\overline{\mathbf{x}}$
	, , , , , , , , , , , , , , , , , , ,		Som 1120 (20	

Form	1120 (2016) LSS Software Holdings, Inc a	ad Sub 45	-4456934		Pag	e 4
	hedule K Other Information (continued from page 3)					
_					Yes	No
5	At the end of the tax year, did the corporation:	ha dataltha	of all algebra of stock pathted to visto a	£		
а	Own directly 20% or more, or own, directly or indirectly, 50% or more of the any foreign or domestic corporation not included on Form 851, Affiliations				1 1	x
	If "Yes," complete (i) through (iv) below:	Schedule? For rule	s of constructive ownership, see instruc	wons.		â
_	ii ves, complete (i) unough (iv) below:	(ii) Employer	1	(Iv) Pe	ercentag	je
	(I) Name of Corporation	(dentification Number (if any)	(III) Country of Incorporation	Owned		
		(ii aity)		- 01	UUA.	
				_		_
b	Own directly an interest of 20% or more, or own, directly or indirectly, an	interest of 50% or ma	ore in any foreign or domestic partnersh	ip	П	
_	(including an entity treated as a partnership) or in the beneficial interest of	f a trust? For rules of	of constructive ownership, see Instruction	ns.	Ш	X
	If "Yes," complete (i) through (iv) below.			*****		
		(II) Employer	All Country of		laximum	
	(f) Name of Entity	Identification Number (if any)	(III) Country of Organization	Percentage Profit, Loss		
		1		1.5		7.5
_						-
6	During this tax year, did the corporation pay dividends (other than stock of	liuldande and dietribu	itions in evchange for stock) in		П	
	excess of the corporation's current and accumulated earnings and profits'		-		Ш	X
	If "Yes," file Form 5452, Corporate Report of Nondividend Distributions.	Coc sections are	ald 310		150	
	If this is a consolidated return, answer here for the parent corporation and	on Form 851 for ea	ch subsidian		33	1
7	At any time during the tax year, did one foreign person own, directly or in				187	15
	classes of the corporation's stock entitled to vote or (b) the total value of				X	
	For rules of attribution, see section 318. If "Yes," enter:		***************************************			
	(i) Percentage owned ▶ 100.000 and (ii) Owner's country ▶	Canada	.,			
	(c) The corporation may have to file Form 5472, Information Return of a			********		
	Corporation Engaged in a U.S. Trade or Business. Enter the number of F					
8	Check this box if the corporation issued publicly offered debt instruments	with original issue di	iscount	>		
	If checked, the corporation may have to file Form 8281, Information Retu	m for Publicly Offere	ed Original Issue Discount Instruments.			
9	Enter the amount of tax-exempt interest received or accrued during the ta	x year > \$	0			
0	Enter the number of shareholders at the end of the tax year (if 100 or few	er) 🕪				
1	If the corporation has an NOL for the tax year and is electing to forego the	e carryback period, c	heck here	▶	13	
	If the corporation is filing a consolidated return, the statement required by	Regulations section	1,1502-21(b)(3) must be attached			
	or the election won't be valid.					
2	Enter the available NOL carryover from prior tax years (don't reduce it by	•	* *************************************			
3	Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the ta	x year and its total asse	its at the end of the		ы	
	tax year less than \$250,000?		*********************		\vdash	X
	If "Yes," the corporation isn't required to complete Schedules L, M-1, and M-2. Instead					
	and the book value of property distributions (other than cash) made during the tax year	ar ▶\$		*******	(57)	-
4	Is the corporation required to file Schedule UTP (Form 1120), Uncertain	Tax Position Stateme	ent? See instructions			X
_	If "Yes," complete and attach Schedule UTP.					
5a	Did the corporation make any payments in 2016 that would require it to fil				X	_
b	If "Yes," did or will the corporation file required Forms 1099?			*******	A	_
6	During this tax year, did the corporation have an 80% or more change in					47
-	own stock? During or subsequent to this tax year, but before the filing of this return, d	14 4ba aaaa4* **	restriction of the Arms the Ar		\vdash	X
7	burning or subsequent to this tax year, but before the filing of this return, d	na the corporation dis	spose of more than 65% (by value)		П	75
	of its assets in a taxable, non-taxable, or tax deferred transaction?	of the decoder—-4	erragepetarkilijanasspanjajanassasspandiskiter	******	\vdash	X
8	Did the corporation receive assets in a section 351 transfer in which any o					X
9	market value of more than \$1 million?			*******	\vdash	_
a	under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471					x
	under unappor a (sections 1991 unough 1909) of unapper 9 (sections 197)	unough (474) Of th	#####	50m 11		

S	n 1120 (2016) LSS Software Hole chedule L Balance Sheets per Books	Beginning		End of tax ye	Page 5		
	Assets	(a)	(b)	(c)	(d)		
1	Cash		75,666		632,574		
2a	Trade notes and accounts receivable	29,576	INTERNATION OF THE PROPERTY OF	229,218			
b	Less allowance for bad debts	0	29,576	0	229,218		
3	Inventories			WINE TENED			
4	U.S. government obligations		A STATE OF THE PARTY OF THE PAR				
5	Tax-exempt securities (see instructions)						
6	Other current assets (att, stmt,)						
7	Loans to shareholders						
8	Mortgage and real estate loans						
9	Other investments (attach strnt.)	0.00	No.				
10a	Buildings and other depreciable assets	214,000		224,142			
b	Less accumulated depreciation	206,293	7,707	220,229	3,913		
11a	Depletable assets			le le	NAME OF BRIDE		
b	Less accumulated depletion	9		1			
12	Land (net of any amortization)						
13a	Intangible assets (amortizable only)						
b	less accumulated amortization						
14	Other assets (attach stmt.) Stmt 3	学用好, 时间到	130,000		0		
15	Total assets		242,949	New York Control of the Control of t	865,705		
	Liabilities and Shareholders' Equity						
16	Accounts payable		0		46,310		
17	Mortgages, notes, bonds payable in less than 1 year	7 59-53-61	J. J. Li				
18	Other current liabilities (att. stmt.) Stmt 4		205,834		324,387		
19	Loans from shareholders		365,700		490,402		
20	Mortgages, notes, bonds payable in 1 year or more	A CONTRACTOR OF THE SAME	10)				
21	Other liabilities (attach statement) Start 5		17,000		17,000		
22	Capital stock: a Preferred stock			10.0			
	b Common stock						
23	Additional paid-in capital	Service All Services					
24	Retained earnings—Appropriated (att. stnt.)						
25	Retained earnings—Unappropriated		-345,585	178 by 178	-12,394		
26	Adjustments to SH equity (att. stmt.)						
27	Less cost of treasury stock						
28	Total liabilities and shareholders' equity		242,949		865,705		
S	chedule M-1 Reconciliation of Inco	ome (Loss) per Boo	oks With Income per Re	eturn			
	Note: The corporation may t	e required to file Schedu	ile M-3. See instructions.				
1	Net income (loss) per books	333,191		ks this year	EVE VENIEN		
2	Federal income tax per books		not included on this retur	m (itemize):			
3	Excess of capital tosses over capital gains		Tax-exempt interest \$				
4	Income subject to tax not recorded on books			March 1			
	this year (itemize):						
			8 Deductions on this return	not charged			
		The second second	against book income this	year (itemize):			
5	Expenses recorded on books this year not	THE RESIDENCE OF THE RE		1 1000000			
5	Expenses recorded on books this year not deducted on this return (itemize):			199			
5 a	deducted on this return (itemize):		a Depreciation \$,				
5 a b	deducted on this return (ilemize): Depreciation \$ Charitable contributions, \$		a Depreciation \$, b Charitable contributions \$				
a b c	deducted on this return (ilemize): Depreciation \$ Charitable contributions \$		a Depreciation \$ b Charitable contributions \$				
a b c	deducted on this return (ilemize): Depreciation \$ Charisable constitutions \$ Travel and entertainment \$		a Depreciation \$, b Charitable contributions \$				
a b c	deducted on this return (ilemize): Depreciation \$ Charitable contributions \$	333,191	a Depreciation \$ b Charitable contributions \$ \$		333,191		
a b c	deducted on this return (ilemize): Depreciation \$ Charitable consistutions, \$ Travel and entertainment \$ Add lines 1 through 5		a Depreciation \$	line 6 less line 9	333,191		
a b c	deducted on this return (ilemize): Depreciation \$ Charlable constitutions \$ Travel and entertainment \$ Add lines 1 through 5 Chedule M-2 Analysis of Unappropri	riated Retained Ea	a Depreciation \$	line 6 less line 9	333,191		
a b c	deducted on this return (ilemize): Depreciation \$ Charliable constitutions, \$ Travel and entertainment \$ Add lines 1 through 5 Chedule M-2 Analysis of Unapprop	riated Retained Ea	a Depreciation \$ b Charitable contributions \$ 9 Add lines 7 and 8 10 Income (page 1, line 28) rnings per Books (Line 5 Distributions: a Cas	line 6 less line 9 25, Schedule L)	333,191		
6 Se	deducted on this return (ilemize): Depreciation \$ Charkable contributions, \$ Travel and entertainment \$ Add lines 1 through 5 Chedule M-2 Analysis of Unappropriation of year Net income (loss) per books	riated Retained Ea	a Depreciation \$ b Charitable contributions \$ 9 Add lines 7 and 8 10 Income (page 1, line 28) rnings per Books (Line 5 Distributions: a Cas b Store	—line 6 less line 9 25, Schedule L) h	333,191		
6 Se 1 2	deducted on this return (itemize): Depreciation \$ Charitable constitutions \$ Travel and entertainment \$ Add lines 1 through 5 Chedule M-2 Analysis of Unapproperations of the properation of t	riated Retained Ea	a Depreciation \$ b Charitable contributions \$ 9 Add lines 7 and 8 10 Income (page 1, line 28) rnings per Books (Line 5 Distributions: a Cas b Store C Proj	—line 6 less line 9 25, Schedule L) h k perty	333,191		
6 Se 1 2	deducted on this return (ilemize): Depreciation \$ Charkable contributions, \$ Travel and entertainment \$ Add lines 1 through 5 Chedule M-2 Analysis of Unappropriation of year Net income (loss) per books	riated Retained Ea	a Depreciation \$ b Charitable contributions \$ 9 Add lines 7 and 8 10 Income (page 1, line 28) rnings per Books (Line 5 Distributions: a Cas b Stor c Programme	—line 6 less line 9 25, Schedule L) h k perty e):	333,191		

Form 4626

Attach to the corporation's tax return.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

Alternative Minimum Tax—Corporations

2016

Name					intification number
LSS	S Software Holdings, Inc and Sub		4:	5-44!	56934
	Note: See the instructions to find out if the corporation is a small corporation exemp.	t from the		187	
	alternative minimum tax (AMT) under section 55(e).			100	
-1	Taxable income or (loss) before net operating loss deduction			. 1	333,191
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2	Adjustments and preferences:				
а	Depreciation of post-1986 property			2a	280
b	Amortization of certifled pollution control facilities			2b	
C	Amortization of mining exploration and development costs			2c	
d	Amortization of circulation expenditures (personal holding companies only)		******************	2d	
0	Adjusted gain or loss	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2e	
f	Long-term contracts	14.4 5 6 6 1 4 6 4		2f	
g	Merchant marine capital construction funds			29	4710
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations or	nly)		2h	
1	Tax shelter farm activities (personal service corporations only)		***************************************	21	
1	Passive activities (closely held corporations and personal service corporations only)			2	
k	Loss limitations				
ï	Depletion			21	
m	Tax-exempt interest income from specified private activity bonds			211	
n	Intendible drilling costs	.,,,,,,,,	***************	2n	
0	Intangible drilling costs Other adjustments and preferences			20	
3	Other adjustments and preferences Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 throug	h 20		3	
•	Pre-Edjustrient alternative minimum taxable moonie (Alviri). Combine mios i tilloug				333,412
А	Adjusted current earnings (ACE) adjustment:			100	3
77	ACE from line 10 of the ACE worksheet in the instructions	48	333,47	14 108	
	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a	48	333,41	-	
þ		اما		100	
_	negative amount. See instructions.	4b		-	
	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c		- 30	
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior			100	
	year ACE adjustments over its total reductions in AMTI from prior year ACE	1 1		10	
	adjustments. See instructions, Note: You must enter an amount on line 4d	1			
	(even if line 4b is positive)	4d		U	
0	ACE adjustment.	_			=
	If line 4b is zero or more, enter the amount from line 4c	r		. 40	
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative am				222 484
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any	AMT		. 5	
6	Alternative tax net operating loss deduction. See instructions			6	300,124
7	Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation				
	interest in a REMIC, see instructions			- 7	33,347
	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter	-0- on line	e 8c):	1.33	
	Subtract \$150,000 from line 7 (if completing this line for a member of a controlled	1 1		32	7)
	group, see instructions). If zero or less, enter -0-	8a		0	
b	Multiply line 8a by 25% (0.25)	8b		0	
C	Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a			100	
	see instructions). If zero or less, enter -0-	,,		8c	40,000
9	Subtract line 8c from line 7. If zero or less, enter -0-			. 9	0
10	Multiply line 9 by 20% (0.20)			10	0
11	Alternative minimum tax foreign tax credit (AMTFTC). See instructions				
. 12	Tentative minimum tax. Subtract line 11 from line 10			12	0
13	Regular tax liability before applying all credits except the foreign tax credit			13	0
14	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 En	iter here a	nd on		
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax	return		14	
For Pap	perwork Reduction Act Notice, see separate instructions.				Form 4626 (2016)

SCHEDULE G (Form 1120)

(Rev. December 2011) Department of the Tressury Internal Revenue Service

Information on Certain Persons Owning the Corporation's Voting Stock

➤ Attach to Form 1120.

➤ See instructions on page 2.

OMB No. 1545-0123

Name				Employer Identificat	tion number (EIN)
LSS Software Holdings, Inc	and Sub			45-44569	34
Part I Certain Entities Owning the Cocolumns (i) through (v) below for as a partnership), trust, or tax-exe indirectly, 50% or more of the total instructions).	orporation's Vot any foreign or d empt organization	omestic corpora that owns dire	ation, par ectly 20%	tnership (including any e or more, or owns, direc	ntity treated tly or
(l) Name of Entity	(ii) Employer Identi Number (if any	(III) Wae I	of Entity	(iv) Country of Organization	(v) Percentage Owner In Voting Stock
Lean Software Services, Inc.	98-06256	62 Foreign	Corp	Canada	100.000
Part II Certain Individuals and Estates Question 4b). Complete columns more, or owns, directly or indirect stock entitled to vote (see instruc	(i) through (iv) body, 50% or more	elow for any inc	dividual o	r estate that owns directly of all classes of the cor	y 20% or poration's
(i) Name of Individual or Estate		(ii) Identifying Number (if any)		(iii) Country of Citizenship (see Instructions)	(iv) Percentage Owned in Voting Stock
			+-		
			-		-
			+		
			_		

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule G (Form 1120) (Rev. 12-2011)

Depreciation and Amortization

(Including Information on Listed Property)

➤ Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

(99)

L	SS Software Hold	ings, Inc a	nd Sub			45-	-445	6934
	ass or activity to which this form relates							
_	egular Depreciat	<u>1011</u> ense Certain Prop	orty Under Cost	on 470				
	Note: If you have	any listed property	complete Part \	hefore you c	omolete Part	1		
1	Maximum amount (see instructi	ions)	Complete Fait v	belore you c	ompiete i en	1.	1	500,000
2	Total cost of section 179 proper	rty placed in service (se	e instructions)	*************	*************		2	10,142
3	Threshold cost of section 179 p	property before reduction	n in limitation (see ins	tructions)	*******		3	2,010,000
4	Reduction in limitation, Subtract	line 3 from line 2. If ze	ro or less, enter -0-			*********	4	0
5	Dollar limitation for tax year. Subtract	line 4 from line 1. If zero	or less, enter -0 If marrie	d filing separately,	see instructions		5	500,000
6		tion of property) Cost (business use		Elected cost		
	See Statement	6		10,	142	10,	142	
						~		
7	Listed property. Enter the amou	nt from line 29			7			
8	Total elected cost of section 179	9 property. Add amount	s in column (c), lines	3 and 7			8	10,142
9	Tentative deduction. Enter the s	smaller of line 5 or line	8	,			9	10,142
10	Carryover of disallowed deduction	on from line 13 of your	2015 Form 4562				10	
11	Business Income limitation. Enter	er the smaller of busine	ss income (not less th	an zero) or line	5 (see instruction	ns)	11	343,333
12	Section 179 expense deduction.						12	10,142
13	Carryover of disallowed deduction			>	13	-		
_	: Don't use Part II or Part III belo							
_		ation Allowance a				proper	ty.) (S	ee instructions.)
14	Special depreciation allowance						l	
	during the tax year (see instruct						14	
15	Property subject to section 168	(f)(1) election		********			15	
16	Other depreciation (including A	crs)	la Bata d	/O !			16	
Pa	ert III MACRS Depreci	ation (Don't include	Section		tions.)		_	
17	MACRS deductions for assets p	loand in annuas in tou					17	3,794
18	If you are electing to group any assets pla					ъΠ	200	The state of the s
10		-Assets Placed in Ser				aciation S	lystem	MA AND REAL PROPERTY.
_		(b) Month and year	(c) Basis for depreciation			T		
	(a) Classification of property	placed in service	(business/investment us only—see instructions)	pariod	(e) Convention	(f) Meth	bot	(g) Depraciation deduction
19a	3-year property							
ь	5-year property							
c	7-year property	STATUTE OF						
d	10-year property	Control of the						
	15-year property							
f	20-year property	Elizabeth States						
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L	_	
	property			27.5 yrs.	MM	S/L	_	
	Nonresidential real			39 yrs.	ММ	S/L		
	property				MM	S/L		
_		Assets Placed In Servi	ce During 2016 Tax	Year Using the	Alternative Dep	preciation	System	m ·
20a	Class life					S/L		
	12-year			12 yrs.		S/L	_	
	40-year			40 yrs.	MM	S/L		
_	rt IV Summary (See i						1	
21	Listed property. Enter amount fr					*******	21	- Latina
22	Total. Add amounts from line 12							40 000
	here and on the appropriate line	•			ctions	*******	22	13,936
23	For assets shown above and pla			the				
_	portion of the basis attributable	to section 263A costs		******	23			. AEG2

5472

(Rev. December 2012)

Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business

(Under Sections 6038A and 6038C of the Internal Revenue Code)

▶ Information about Form 5472 and its separate instructions is at www.irs.gov/form5472. For tax year of the reporting corporation beginning 01/01/16 , and ending 12/31/16

OMB No. 1545-0805

Department of the Treasury Internal Revenue Service

Note: Enter all information in English and money items in U.S. dollars. Reporting Corporation (see instructions). All reporting corporations must complete Part I. Part i 1b Employer identification number 1a Name of reporting corporation 45-4456934 LSS Software Holdings, Inc and Sub Number, street, and room or suite no. (if a P.O. box, see Instructions) 1c Total assets 159 Linwood Avenue City or town, state, and ZIP code (if a foreign address, see instructions) Buffalo NY 14209 865,705 1d Principal business activity > Other Computer Services 1e Principal business activity code ▶ 541519 1g Total number of Forms 5472 1f Total value of gross payments made or received 1h Total value of gross payments made or received (see (see instructions) reported on this Form 5472 filed for the tax year instructions) reported on all Forms 5472 2,248,646 2,265,646 11 Check here 11 Principal country(ies) where 1) Country of 1k Country(les) under whose laws the reporting if this is Stmt 7 business is conducted Incorporation corporation files an income tax return as a resident a consolidated filling X of Form 5472 Check here if, at any time during the tax year, any foreign person owned, directly or indirectly, at least 50% of (a) the total voting power of all classes of the stock of the reporting corporation entitled to vote, or (b) the total value of all classes of stock of the reporting corporation > X 25% Foreign Shareholder (see instructions) 1a Name and address of direct 25% foreign shareholder 1b(1) U.S. identifying number, if any 98-0625662 Lean Software Services, Inc. 1b(2) Reference ID number (see 45A West Wilmot St, Ste 209 instructions) Richmond Hill ON L4B 2P2 Canada 1e Country(les) under whose laws the direct 25% foreign 1c Principal country(ies) where 1d Country of citizenship, business is conducted shareholder files an income tax return as a resident organization, or incorporation Canada Canada 2b(1) U.S. identifying number, if any 2a Name and address of direct 25% foreign shareholder 2b(2) Reference ID number (see instructions) 2c Principal country(ies) where 2d Country of citizenship, 2e Country(ies) under whose laws the direct 25% foreign business is conducted organization, or incorporation shareholder files an income tax return as a resident 3a Name and address of ultimate indirect 25% foreign shareholder 3b(1) U.S. identifying number, if any Stmt 8 067-60-2903 Bjorn Larsen 3b(2) Reference ID number (see 45A West Wilmot St. Ste 209 instructions) Richmond Hill ON L4B 2P2 Canada 3e Country(ies) under whose laws the ultimate Indirect 25% 3c Principal country(ies) where 3d Country of citizenship, business is conducted organization, or incorporation foreign shareholder files an income tax return as a resident Canada Canada Canada 4a Name and address of ultimate indirect 25% foreign shareholder 4b(1) U.S. identifying number, if any 4b(2) Reference ID number (see instructions) 4e Country(ies) under whose laws the ultimate indirect 25% 4c Principal country(ies) where 4d Country of citizenship, foreign shareholder files an income tax return as a resident business is conducted organization, or incorporation Form 5472 (Rev. 12-2012) For Paperwork Reduction Act Notice, see Instructions.

Form 5472 (Rev. 12-2012) LSS Software Holdings, Inc and Sub 45-4456934		Page 2
Part III Related Party (see instructions)		
Check applicable box: Is the related party a X foreign person or U.S. person	1?	
All reporting corporations must complete this question and the rest of Part III.	41-441-11-0-1	
1a Name and address of related party		dentifying number, if any
Lean Software Services, Inc.		625662
45A West Wilmot St, Ste 209		ence ID number (see
Richmond Hill ON L4B 2P2 Canada	msuut	uoris)
1c Principal business activity > Other Computer Services 1d Principal business	s adjuity cod	a≽ 541519
1e Relationship-Check boxes that apply: Related to reporting corporation Related to 25% foreign shareholders.		
1f Principal country(ies) where business is conducted 1g Country(ies) under whose laws the related party files an		
resident		
Canada Canada		
Part IV Monetary Transactions Between Reporting Corporations and Foreign Related		
Caution: Part IV must be completed if the "foreign person" box is checked in the he	ading for F	art III.
If estimates are used, check here		
1 Sales of stock in trade (inventory)	1	
2 Sales or tangible property other than stock in trade	2	
3 Platform contribution transaction payments received	3	
4 Cost sharing transaction payments received	4	
5a Rents received (for other than intangible property rights)	5a 5b	
 b Royalties received (for other than intangible property rights) 6 Sales, leases, licenses, etc., of intangible property rights (e.g., patents, trademarks, secret formulas) 	6	
7 Consideration received for technical, managerial, engineering, construction, scientific, or like services	7	331,771
8 Commissions received 9 Amounts borrowed (see instructions) a Beginning balance	9b	490,402
10 Interest received	10	
11 Premiums received for insurance or reinsurance	11	
12 Other amounts received (see instructions)	12	
13 Total. Combine amounts on lines 1 through 12	13	822,173
14 Purchases of stock in trade (inventory)	14	
15 Purchases of tangible property other than stock in trade	15	
16 Platform contribution transaction payments paid	16	
17 Cost sharing transaction payments paid	17	202,982
188 Rents paid (for other than intangible property rights)	18a	
b Royalties paid (for other than intangible property rights)	18b	
19 Purchases, leases, licenses, etc., of intangible property rights (e.g., patents, trademarks, secret formulas)	19	1 000 101
20 Consideration paid for technical, managerial, engineering, construction, scientific, or like services	20	1,223,491
21 Commissions paid	21	
22 Amounts loaned (see instructions) a Beginning belance		
23 Interest paid		
24 Premiums paid for insurance or reinsurance	25	
25 Other amounts paid (see instructions) 26 Total. Combine amounts on lines 14 through 25	26	1,426,473
Part V Nonmonetary and Less-Than-Full Consideration Transactions Between the Re		
the Foreign Related Party (see instructions)	portung o	portation and
Describe these transactions on an attached separate sheet and check here.	7	
Part VI Additional Information		
All reporting corporations must complete Part VI.		
1 Does the reporting corporation import goods from a foreign related party?		Yes X No
2a If "Yes," is the basis or inventory cost of the goods valued at greater than the customs value of the imported goods	?	Yes No
if "No," do not complete b and c below.	10	
b If "Yes," attach a statement explaining the reason or reasons for such difference.		
c If the answers to questions 1 and 2a are "Yes," were the documents used to support this treatment of the imported		
goods in existence and available in the United States at the time of filing Form 5472?	. 1000 111111	Yes No
3 During the tax year, was the foreign parent corporation a participant in any cost sharing arrangement?		Yes X No
4 During the course of the tax year, did the foreign parent corporation become a participant in any cost sharing		C
arrangement?		
		Form 5472 (Rev. 12-2012)

5472

(Rev. December 2012)

Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business

(Under Sections 6038A and 6038C of the Internal Revenue Code)

OMB No. 1545-0805

Information about Form 5472 and its separate instructions is at www.irs.gov/form5472.

Department of the Treasury Internal Revenue Service

For tax year of the reporting corporation beginning 01/01/16, and ending 12/31/16 Note. Enter all information in English and money items in U.S. dollars.

Reporting Corporation (see instructions), All reporting corporations must complete Part I. Part I 1a Name of reporting corporation 1b Employer identification number LSS Software Holdings, Inc and Sub 45-4456934 Number, street, and room or suite no. (if a P.O. box, see instructions) 1c Total assets 159 Linwood Avenue City or town, state, and ZIP code (if a foreign address, see instructions) Buffalo NY 14209 865,705 1d Principal business activity > Other Computer Services 1e Principal business activity code ➤ 541519 1f Total value of gross payments made or received 1g Total number of Forms 5472 1h Total value of gross payments made or received (see (see instructions) reported on this Form 5472 filed for the tax year instructions) reported on all Forms 5472 17,000 2,265,646 1i Check here 1j Country of 11 Principal country(les) where 1k Country(ies) under whose laws the reporting If this is Stmt 9 incorporation business is conducted corporation files an income tax return as a resident a consolidated filing USA X USA USA of Form 5472 2 Check here if, at any time during the tax year, any foreign person owned, directly or indirectly, at least 50% of (a) the total voting power of all classes of the stock of the reporting corporation entitled to vote, or (b) the total value of all classes of stock of the reporting corporation > X 25% Foreign Shareholder (see instructions) 1a Name and address of direct 25% foreign shareholder 1b(1) U.S. identifying number, if any 98-0625662 Lean Software Services, Inc. 1b(2) Reference ID number (see 45A West Wilmot St, Ste 209 instructions) Richmond Hill ON L4B 2P2 Canada 1c Principal country(ies) where 1d Country of citizenship, 1e Country(ies) under whose laws the direct 25% foreign business is conducted organization, or incorporation shareholder files an income tax return as a resident Canada Canada 2a Name and address of direct 25% foreign shareholder 2b(1) U.S. identifying number, if any 2b(2) Reference ID number (see instructions) 2c Principal country(ies) where 2d Country of citizenship, 2e Country(les) under whose laws the direct 25% foreign business is conducted organization, or incorporation shareholder files an income tax return as a resident 3a Name and address of ultimate indirect 25% foreign shareholder 3b(1) U.S. identifying number, if any Stmt 10 067-60-2903 Bjorn Larsen 3b(2) Reference ID number (see 45A West Wilmot St, Ste 209 instructions) Richmond Hill ON L4B 2P2 Canada 3c Principal country(ies) where 3d Country of citizenship, 3e Country(ies) under whose laws the ultimate indirect 25% business is conducted organization, or incorporation foreign shareholder files an income tax return as a resident Canada Canada Canada 4a Name and address of ultimate indirect 25% foreign shareholder 4b(1) U.S. identifying number, if any 4b(2) Reference ID number (see instructions) 4c Principal country(ies) where 4d Country of citizenship, 4e Country(les) under whose laws the ultimate indirect 25% business is conducted organization, or incorporation foreign shareholder files an income tax return as a resident For Paperwork Reduction Act Notice, see Instructions. Form 5472 (Rev. 12-2012)

Form 5472 (Rev. 12-2012) LSS Software Holdings, Inc and Sub 45-4456934	Page 2
Part III Related Party (see instructions)	
Check applicable box: Is the related party a foreign person or U.S. person?	
All reporting corporations must complete this question and the rest of Part III.	
1a Name and address of related party	b(1) U.S. identifying number, if any
Bjorn Larsen	067-60-2903 b(2) Reference ID number (see
45A West Wilmot St, Ste 209	instructions)
Richmond Hill ON L4B 2P2 Canada	HIST GCHOILS)
	ctivity code ► 541519
1e Relationship-Check boxes that apply: Related to reporting corporation X Related to 25% foreign shareholder	
1f Principal country(ies) where business is conducted 1g Country(ies) under whose laws the related party files an inc	
resident	
Canada Canada	
Part IV Monetary Transactions Between Reporting Corporations and Foreign Related Pa	
Caution: Part IV must be completed if the "foreign person" box is checked in the head	ing for Part III.
If estimates are used, check here ▶	
1 Sales of stock in trade (inventory)	1
2 Sales of tangible property other than stock in trade	2
3 Platform contribution transaction payments received	3
4 Cost sharing transaction payments received	5a
5a Rents received (for other than intangible property rights) b Royalties received (for other than intangible property rights)	5b
6 Sales, leases, licenses, etc., of intangible property rights (e.g., patents, trademarks, secret formulas)	6
7 Consideration received for technical, managerial, engineering, construction, scientific, or like services	7
8 Commissions received	8
8 Commissions received 9 Amounts borrowed (see instructions) a Beginning balance	9b 17,000
10 Interest received	10
11 Premiums received for insurance or reinsurance	11
12 Other amounts received (see instructions)	12
13 Total. Combine amounts on lines 1 through 12	13 17,000
14 Purchases of stock in trade (inventory)	14
15 Purchases of tangible property other than stock in trade	15
16 Platform contribution transaction payments paid	16
17 Cost sharing transaction payments paid	17
18a Rents paid (for other than inlangible property rights)	18a
b Royalties paid (for other than intangible property rights) 19 Purchases, leases, licenses, etc., of intangible property rights (e.g., patents, trademarks, secret formulas)	19
20 Consideration paid for technical, managerial, engineering, construction, scientific, or like services	20
21 Commissions paid	
22 Amounts loaned (see instructions) a Beginning balance b Ending balance or monthly average ▶	
23 Interest paid	00
24 Premiums paid for insurance or reinsurance	24
25 Other amounts paid (see instructions)	25
26 Total. Combine amounts on lines 14 through 25	26 0
Part V Nonmonetary and Less-Than-Full Consideration Transactions Between the Repo	rting Corporation and
the Foreign Related Party (see instructions)	
Describe these transactions on an attached separate sheet and check here.	
Part VI Additional Information	v
All reporting corporations must complete Part VI.	
Does the reporting corporation import goods from a foreign related party? If "Yes," is the basis or inventory cost of the goods valued at greater than the customs value of the imported goods?	Yes X No
If "No," do not complete b and c below.	Yes No
b If "Yes," attach a statement explaining the reason or reasons for such difference.	
c If the answers to questions 1 and 2a are "Yes," were the documents used to support this treatment of the imported	
goods in existence and available in the United States at the time of filling Form 5472?	Yes No
3 During the tax year, was the foreign parent corporation a participant in any cost sharing arrangement?	Yes X No
4 During the course of the tax year, did the foreign parent corporation become a participant in any cost sharing	
arrangement?	Yes X No.
	Form 5472 (Rev. 12-2012)

Form 851

(Rev. October 2016)

Affiliations Schedule

For tax year ending 12/31/16

File with each consolidated income tax return.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service Information about Form 851 and its instructions is at www.irs.gov/form851. Employer identification number Name of common parent corporation 45-4456934 LSS Software Holdings, Inc. Number, street, and room or suite no. If a P.O. box, see instructions. 159 Linwood Avenue City or town, state, and ZIP code Buffalo NY 14209 Part I Overpayment Credits, Estimated Tax Payments, and Tax Deposits (see instructions) Portion of tax Employer Corp. overpayment credits Name and address of corporation Identification deposited with No. and estimated Form 7004 number tax payments 0 1 Common parent corporation 0 Subsidiary corporations: LSS Aircraft Holdings, 159 Linwood Avenue 2 Buffalo NY 14209 27-1712275 Totals (Must equal amounts shown on the consolidated tax return.) 0 0 Part II Principal Business Activity, Voting Stock Information, Etc. (see instructions) Did the subsidiary Stock holdings at beginning of year PBA make any nondividend Com. Principal business activity (PBA) Code distributions? No, Owned by Number Percentage of voting No. of shares Yes No power no. Common parent corporation: 1 Other Computer Services 541519 Subsidiary corporations: 2 Air Transportation 481000 X 200 100.00% 100.00% 1 %

Part	III Changes in Stock Holdings During the T			45-445	6934	-	Page 2
2 0.1 0.	oranges in stock rigidings buring the r	Share- holder	Date	(a) Ch	anges	(b) Shares in changes d	neld after escribed in nn (a)
Corp, No,	Name of corporation	of Corpo- ration No.	of transaction	Number of shares acquired	Number of shares disposed of	Percentage of voting power	Percentage of value
						%	%
						%	%
						%	%
						%	%
	es de					%	%
						%	%
						%	%
						%	%
(e) If 1	the equitable owners of any capital stock shown above were of	her than	the holders of rec	ord, provide d	letails of the ch	anges.	
(f) If a	additional stock was issued, or if any stock was retired during t	he year,	list the dates and	amounts of th	nese transaction	ns.	
						Form 8	51 (Rev. 10-2016)

	51 (Rev. 10-2016) LSS SOFTWARE HOLdings, Inc a	no :	SUD 45-445	0934		Page 3
Part	IV Additional Stock Information (see instructions) ouring the tax year, did the corporation have more than one class of stock out	otondin	~?		Yes	X No
	"Yes," enter the name of the corporation and list and describe each class of		At ************************************	**********************	105	W 140
Corp.	Name of corporation	- 1		Class of stock		
		- 1				
		_				
	during the tax year, was there any member of the consolidated group that real				П.,	Tel
	isaffiliation?		************		Yes	X No
П	"Yes," enter the name of the corporation(s) and explain the circumstances.				_	
Corp.	Name of corporation			Explanation		
No,	Name of corporation			Explanation		
		-		"a" deser		
3 0	uring the tax year, was there any arrangement in existence by which one or n	nore pe	rsons that were no	t		
	nembers of the affiliated group could acquire any stock, or acquire any voting					
	tock, in the corporation, other than a de minimis amount, from the corporation					
a	ffiliated group? "Yes," enter the name of the corporation and see the instructions for the per	****			. Yes	X No
	"Yes," enter the name of the corporation and see the instructions for the percent, (b), and (c).	centage	s to enter in colum	ns		
117	i), (b), and (c).			(b)	(c)	
Corp. No.	Name of corporation	_	(a)	(b) Percentage of outstanding voting	Percentag	e of
140.		Perc	entage of value	stock	voting po	
						7
			%	%		%
		-	%	%		%
			%	%		%
_			70	70		70
			%	%		%
Corp.	(d) Provide a description of any arrangement.					
No,	(d) Flovide a description of any analogement.					
_						
					Form 851 (R	ev. 10-2016)

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Consolidated Report

FYE: 12/31/2016

Form 1120, Page 1

			Elimination Company		LSS Software Holdinge, inc and Sub
			45-4458934		45-4456934
1 a	Gross receipts or sales	2,835,938			2,835,938
1 b	Returns and allowances	5,448			5,448
1 c	Net receipts or sales	2,830,490			2,830,490
2	Cost of goods sold				
3	Gross profit	2,830,490			2,830,490
4	Dividends				
5	Interest	3,000			3,000
6	Gross fents				
7	Gross royalties				
8	Capital gain net income				
9	Net gain or (loss) from Form 4797				
10	Other income	1,144			1,144
11	Total income	2,834,634			2,834,634
12	Compensation of officers				
13	Salaries and wages	716,171			716,171
14	Repairs and maintenance	2,692			2,692
15	Bad debts				
16	Rents	31,900			31,900
17	Taxes and licenses	59,041			59,041
10	Interest				
19	Charitable contributions				
20	Depreciation	13,936			13,936
21	Depletion				
22	Advertising	1,666			1,666
23	Pension, profit-sharing, etc., plans				
24	Employee benefit programs	91,225			91,225
5	Domestic production activities deduction				
26	Other deductions	1,584,912			1,584,812
27	Total deductions	2,501,443	-		2,501,443
26	Taxable income before NOL and				
	special deductions	333,191	0		333,191
29 а	NOL deduction	205,008		128,183	333,191
29 b	Special deductions				
30	Taxable income	128,183	0	-128,183	0

		PARENT LSS Software Holdings, Inc.	SUBSIDIARY LSS Aircreft Holdings, Inc.
		45-4456934	27-1712275
1 a	Gross receipts or sales	2,835,938	
1 b	Returns and allowances	5,448	
1 c	Net receipts or sales	2,830,490	
2	Cost of goods sold		
3	Gross profit	2,830,490	
4	Dividends		
5	Interest	3,000	
6	Gross rents		
7	Gross royalties		
8	Capital gain net income		
9	Net gain or (loss) from Form 4797		
10	Other income	1,144	
11	Total income	2,834,634	
12	Compensation of officers	200 100	
13	Salaries and wages	716,171	
14	Repairs and maintenance	2,692	
15	Bad debts		
16	Rents	31,900	
17	Taxes and licenses	59,041	
18	Interest		
19	Charitable contributions		
20	Depreciation	10,142	3,794
21	Depletion		
22	Advertising	1,666	
23	Pension, profit-sharing, etc., plans		
24	Employee benefit programs	91,225	
25	Domestic production activities deduction		
26	Other deductions	1,536,360	48,452
27	Total deductions	2,449,197	52,246
28	Taxable income before NOL and		
20	special deductions	385,437	-52,246
29 a	NOL deduction	205,000	
29 b	Special deductions	200,000	

30	Taxable income	180,429	-52,246

		COMBINED TOTALS	ELIMINATIONS LSS Software Elimination Company	ADJUSTMENTS	CONSOLIDATED LSS Software Holdings, Inc. and	
			45-4456934		Holdings, Inc and Sub 45-4456834	
Asset	4					
1	Cash	75,666			75,666	
2 a	Trade notes and accounts receivable	29,576			29,576	
2 þ	Less allowance for bad debts					
3	Inventories					
4	U.S. government obligations					
5	Tax-exempt securities					
6	Other current assets					
7	Loans to shareholders					
8	Mortgage and real estate loans					
9	Other investments					
10 a	Buildings and other depreciable assets	214,000			214,000	
10 b	Less accumulated depreciation	206,293			206,293	
11 a	Depletable assets					
	Less accumulated depletion					
12	Land (net of any amortization)					
13 a 13 b	Intangible assets (amortizable only) Less accumulated amortization					
14	Other assets	453 146	202 146			
	Other assets	452,146	-322,146		130,000	
15	Total assets	565,095	-322,146		242,949	
Liabi	lities and Shareholders' Equity					
16	Accounts payable					
17	Mortgages, notes, and bonds					
	payable in less than 1 year					
18	Other current liabilities	205,834			205,834	
19	Loans from shareholders	365,700			365,700	
20	Mortgages, notes, and bonds					
	payable in 1 year or more					
21	Other liabilities	339,146	-322,146		17,000	
22 a	Capital stock - Preferred					
22 b	Capital stock - Common					
23	Additional paid-in capital					
24	Retained earnings - Appropriated					
25	Retained earnings - Unappropriated	-345,585			-345,585	
26	Adjustments to shareholders' equity					
27	Less cost of treasury stock				- V	
28	Total liabilities and					
	shareholders' equity	565,095	-322,146		242,949	
					-	

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Consolidated Report

FYE: 12/31/2016

Form 1120, Schedule L Beginning of Tax Year

		PARENT LS\$ Software	SUBSIDIARY LSS Aircraft
		Holdings, Inc.	Holdings, Inc.
Asset	a	45-4456934	27-1712275
1	Cash	71,723	3,943
2 a	Trade notes and accounts receivable	29,576	0,770
2 b	Less allowance for bad debts		
3	Inventories		
4	U.S. government obligations		
5	Tax-exempt securities		
6	Other current assets		
7	Loans to shareholders		
8	Mortgage and real estate loans		
9 10 a	Other investments		21 1 220
10 a	Buildings and other depreciable assets Less accumulated depreciation		214,000
11 a	Depletable assets		200,293
	Less accumulated depletion		
12	Land (net of any amortization)		
13 а	Intangible assets (amortizable only)		
13 b	Less accumulated amortization		
14	Other assets	452,146	
15	Total assets	553,445	11,650
Liabi	lities and Shareholders' Equity		-
16	Accounts payable		
17	Mortgages, notes, and bonds		
	payable in less than 1 year		
18	Other current liabilities	205,834	
19	Loans from shareholders	365,700	
20	Mortgages, notes, and bonds		
	payable in 1 year or more		
21	Other liabilities	17,000	322,146
22 a 22 b	Capital stock - Preferred		
22 b	Capital stock - Common Additional paid-in capital		
24	Retained earnings - Appropriated		
25	Retained earnings - Appropriated Retained earnings - Unappropriated	-35,089	-310,496
26	Adjustments to shareholders' equity	-33,009	-310,490
27	Less cost of treasury stock		
28	Total liabilities and		
	shareholders' equity	553,445	11,650

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Consolidated Report

FYE: 12/31/2016

Form 1120, Schedule L End of Tax Year

		COMBINED TOTALS	ELIMINATIONS LSS Software Elimination Company	ADJUSTMENTS	CONSOLIDATED LSS Software Holdinge, Inc and Sub
			45-4456934		45-4456934
Asset			· ·		
1	Cash	632,574			632,574
2 a	Trade notes and accounts receivable	229,218			229,218
2 b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities Other current assets				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments				
10 a	Buildings and other depreciable assets	224,142			224,142
10 b	Less accumulated depreciation	220,229			220,229
11 a	Depletable assets	220,22.3			220,229
11 b	Less accumulated depletion				
12	Land (net of any amortization)				
13 a	Intangible assets (amortizable only)				
13 b	Less accumulated amortization				
. 4	Other assets	369,896	-369,896		
15	Total assets	1,235,601	-369,896		865,705
iabi	lities and Shareholders' Equity				
16	Accounts payable	46,310			46,310
L7	Mortgages, notes, and bonds	,			
	payable in less than I year				
1.8	Other current liabilities	324,387			324,387
19	Loans from shareholders	490,402			490,402
20	Mortgages, notes, and bonds				
	payable in 1 year or more				
21	Other liabilities	386,896	-369,896		17,000
22 a	Capital stock - Preferred				
22 b	Capital stock - Common				
23	Additional paid~in capital				
24	Retained earnings - Appropriated				
25	Retained earnings - Unappropriated	-12,394			-12,394
26	Adjustments to shareholders' equity				
27	Less cost of treasury stock				
28	Total liabilities and				
	shareholders' equity	1,235,601	-369,896		865,705

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Consolidated Report

Form 1120, Schedule L End of Tax Year FYE: 12/31/2016

LSS Software Holdings, Inc. 45-4458834 629, 333 229, 218	27-171 <u>2275</u> 3,241 214,000
229,218	214,000
229,218	214,000
10,142	
10,142	
	210,087
369,896	
	2.154
1,228,447	7,154
46,310	
324,387	
490,402	
17,000	369,896
350,348	-362,742
9-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
1,228,447	7,154
	1,228,447

Schedule M-1 1 Net income (loss) per books 333,191 0 333,191 2 Federal income tax 3 Excess capital losses over capital geins 4 Income subject to tax not recorded on books 5 Expenses recorded on books not deducted on this return: 5 a Depreciation 5 b Contributions carryover 5 c Travel and entertainment
Schedule M-1 Net income (loss) per books State of the income (loss) per books Excess capital losses over capital gains Income subject to tax not recorded on books Expenses recorded on books not deducted on this return: Depreciation Contributions carryover Contributions carryover
2 Federal income tax 3 Excess capital losses over capital gains 4 Income subject to tax not recorded on books 5 Expenses recorded on books not deducted on this return: 5 a Depreciation 5 b Contributions carryover 5 c Travel and entertainment
Excess capital losses over capital geins Income subject to tax not recorded on books Expenses recorded on books not deducted on this return: a Depreciation become carryover currently contributions carryover currently carryover currently carryover
Income subject to tax not recorded on books Expenses recorded on books not deducted on this return: a Depreciation Contributions carryover Contributions carryover
5 Expenses recorded on books not deducted on this return: 5 a Depreciation 5 b Contributions carryover 5 c Travel and entertainment
5 a Depreciation 5 b Contributions carryover 5 c Travel and entertainment
5 b Contributions carryover 5 c Travel and entertainment
Other
6 Total of lines 1 through 5 333,191 333,191
7 Income recorded on books not
included on this return:
Tax exempt interest
Other 8 Deductions on this zeturn not
charged against book income:
8 a Depreciation
8 b Contributions carryover
Other
9 Total lines 7 and 8
10 Income (line 26, page 1)-line 6 less line 9 333,191 0 333,191
Schedule M-2
1 Balance at beginning of year -345,585 0 -345,585
2 Net income (loss) per books 333,191 333,191
3 Other increases
4 Total lines 1 through 3 +12,394 -12,394
5 Distributions:
5 a Cash 5 b Stock
5 c Property
6 Other decreases
7 Total lines 5 and 6
8 Balance at end of year -12,394 0 -12,394

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Consolidated Report

FYE: 12/31/2016

Form 1120, Schedules M-1 and M-2

		PARENT LSS Software Holdings, Inc.	SUBSIDIARY LSS Aircraft Holdings, Inc
		45-4456934	27-1712275
Scheol 1 2 3 4 5 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Contributions carryover Travel and entertainment Other	385,437	-52,246
6 7 8 8 a 8 b	Total of lines 1 through 5 Income recorded on books not included on this return: Tax exempt interest Other Deductions on this return not charged against book income: Depreciation Contributions carryover Other	385,437	-52,246
9	Total lines 7 and θ		
10	Income (line 28, page 1)-line 6 less line 9	385,437	-52,246
	tule M-2		
2	Balance at beginning of year Net income (loss) per books	-35,089 385,437	-310,496 -52,246
3	Other increases		
4 5 5 a b c 5 c	Total lines 1 through 3 Distributions: Cash Stock Property Other decreases	350,348	-362,742
	Total lines 5 and 6		
7			-362,742

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Consolidated Report

Form 4562 FYE: 12/31/2016

		COMBINED TOTALS	ELIMINATIONS LSS Software	ADJUSTMENTS	CONSOLIDATED LSS Software	
			Elimination Company		Holdings, the end	
			46-4456934		45-4456934	
	I - Section 179					
2	Total cost of section 179					
_	property placed in service	10,142			10,142	
6	Nonlisted property	10,142			10,142	
7	Listed property					
8	Total elected cost	10,142			10,142	
9	Tentative deduction	10,142			10,142	
10	Carryover of disallowed					
	deduction from prior year					
12	Section 179 expense deduction	10,142			10,142	
13	Carryover of disallowed					
	deduction to next year					
	II - Special Depreciation Allowance					
	Other Depreciation					
14	Special depreciation allowance for					
	qualified property					
15	Property subject to 168(f)(1)					
16	Other depreciation (including ACRS)					
Part	III - MACRS Depreciation					
17	MACRS deductions for assets placed					
	in service before current year	3,794			3,794	
Gener	al Depreciation System (GDS)					
19 а	3-year property					
19 b	5-year property					
19 c	7-year property					
19 d	10-year property					
19 e	15-year property					
19 f	20-year property					
19 g	25-year property					
19 h	27.5-year residential rental property					
19 i	Nonresidential real property					
Alter	native Depreciation System (ADS)					
20 a	Class life					
20 b	12-year					
20 c	40-year					
Part	IV - Summary					
21	Listed property					
22	Total depreciation	13,936			13,936	
23	Portion of basis attributable to 263A costs					
42	Amortization - current year					
43	Amortization - prior years					
44	Total amortization					

LSSSOFTSUBS LSS Software Holdings, Inc and Sub
45-4456934 Consolidated Report
FYE: 12/31/2016 Form 4562

		PARENT LSS Software Holdings, Inc.	SUBSIDIARY LSS Aircreft Holdings, Inc.
		45-4458934	27-1712275
	t I - Saction 179		
2	Total cost of section 179		
	property placed in service	10,142	
6	Nonlisted property	10,142	
7	Listed property		
Ð	Total elected cost	10,142	
9	Tentative deduction	10,142	
10	Carryover of disallowed		
	deduction from prior year		
12	Section 179 expense deduction	10,142	
13	Carryover of disallowed		
	deduction to next year		
	t II - Special Depreciation Allowance		
	Other Depreciation		
14	Special depreciation allowance for		
	qualified property		
15	Property subject to 168(f)(1)		
16	Other depreciation (including ACRS)		
	t III - MACRS Depreciation		
17	MACRS deductions for assets placed		
Con	in service before current year		3,794
	eral Depreciation System (GDS)		
	a 3-year property		
	5-year property		
	7-year property		
	1 10-year property		
	5 15-year property		
	f 20-year property g 25-year property		
	27.5-year residential rental property Nonresidential real property		
	ernative Depreciation System (ADS)		
	a Class life		
	o 12-year		
	40-year		
	: IV - Summary		
21	Listed property		
22	Total depreciation	10,142	2 204
23	Portion of basis attributable to 263A costs	TO, 142	3,794
42	Amortization - current year		
43	Amortization - current year Amortization - prior years		
44	Total amortization		
17	10001 Black F188 F101		

LSSSOFTSUBS LSS Software Holdings, Inc and Sub
45-4456934 Consolidated Report
FYE: 12/31/2016 Form 4626, AMT

		COMBINED TOTALS	ELIMINATIONS LSS Software Elimination Company	ADJUSTMENTS	CONSOLIDATED LSS Software Holdings, Inc and Sub	
			45-4458934		45-4456934	
1	Taxable income/(loss) before NOL deduction	333,191	0		333,191	
Adju	stments and Preferences					
2 a	Depreciation of post-1986 property	280			280	
2 b						
	control facilities					
2 ¢	Amortization of mining exploration					
	and development costs					
2 d	Amortization of circulation expenditures					
2 €	Adjusted gain or loss					
2 £	Long-term contracts					
2 g	Merchant marine capital construction funds Sec 833(b) deduction					
2 h 2 i	Tax shelter term activities					
	Passive activities					
2 j 2 k	Loss limitations					
2 1	Depletion					
2 m						
2 111	private activity bonds					
2 n	Intangible drilling costs					
2 0	Other adjustments					
		202 421			202 475	
3	Preadjustment AMTI	333,471			333,471	
Adju	sted Current Earnings (ACE) Adjustment					
4 a	ACE from line 10 of worksheet	333,471			333,471	
4 b	Line 4a less line 3					
4 c	Line 4b multiplied by 75%					
4 d	Increase in AMTI from prior					
	years' ACE adjustments					
4 e	ACE adjustment					
5	Total lines 3 and 4e	333,471			333,471	
6	AMT NOL deduction	210,289		89,835	300,124	
7	Alternative minimum taxable income	123,182	0	-89,835	33,347	

LSSSOFTSUBS LSS Software Holdings, Inc and Sub
45-4456934 Consolidated Report
FYE: 12/31/2016 Form 4626, AMT

I IL. ILIONAUIO					
	PARENT LSS Software Holdings, Inc.	SUBSIDIARY LSS Arcreft Holdings, Inc.			
	45-4456934	27-1712275			
1 Taxable income/(loss) before NOL deduction	385,437	-52,246			
Adjustments and Preferences					
2 a Depreciation of post-1986 property		280			
2 b Amortization of certified pollution					
control facilities					
2 c Amortization of mining exploration					
and development costs					
2 d Amortization of circulation expenditures					
2 e Adjusted gain or loss					
2 f Long-term contracts 2 g Merchant marine capital construction funds					
2 h Sec 833(b) deduction					
2 i Tax shelter farm activities					
2 i Passive activities					
2 k Loss limitations					
2 1 Depletion					
2 m Tax-exempt interest from					
private activity bonds					
2 n Intangible drilling costs					
2 o Other adjustments					
3 Preadjustment AMTI	385,437	-51,966			
Adjusted Current Earnings (ACE) Adjustment					
4 a ACE from line 10 of worksheet	385,437	-51,966			
4 b Line 4a less line 3	,	,			
4 c Line 4b multiplied by 75%					
4 d Increase in AMTI from prior					
years' ACE adjustments					
4 e ACE adjustment					
5 Total lines 3 and 4e	385,437	-51,966			
6 AMT NOL deduction	210,289	, , , , , , , , , , , , , , , , , , , ,			
7 Alternative minimum taxable income	175,149	-51,966			
Legeringer & management country recome	110/110	72,300			

LSSSOFTSUBS LSS Software Holdings, Inc and Sub
45-4456934 Consolidated Report
FYE: 12/31/2016 Form 4626, ACE

		COMBINED TOTALS	ELIMINATIONS LSS Software Elimination Company	ADJUSTMENTS	CONSOLIDATED LSS Software Holdings, Inc and Sub	
			45-4468934		45-4456B34	
1	Preadjustment AMTI	333,471			333,471	
ACE D	epreciation Adjustment					
2 a	AMT depreciation	13,656			13,656	
2 b	ACE depreciation:					
2 b	(1) Post-1993 property	13,656			13,656	
2 b	(2) Post-1989, pre-1994 property					
2 b	(3) Pre-1990 MACRS property					
2 b	(4) Pre-1990 original ACRS property					
2 b	(5) Section 168(f)(1) through (4) (6) Other property					
2 b	(7) Total ACE depreciation	13,656			13,656	
2 c	ACE depreciation adjustment					
Items	Included in Earnings and Profits (E&P)					
3 a	Tax-exempt interest income Life insurance death benefits					
3 6	Other life insurance distributions					
3 d	Inside buildup of undistributed income					
3 e	Other items					
3 £	Total increase due to E&P items					
	Lowance of Items Not Deductible From EEP					
	Certain dividends received					
4 b	Public utility dividends					
4 c	Dividends paid to an ESOP					
4 d	Nonpatronage dividends					
4 e	Other items					
4 f	Tot due to disallow of nondeduct E&P items			i		
Other						
5 a	Intangible drilling costs					
5 b	Circulation expenditures					
5 c	Organizational expenditures					
5 d	LIFO inventory adjustments					
5 e	Installment sales					
5 £	Total other E&P adjustments					
6	Loss disallowance on exhange of debt pools					
7	Acquisition expenses-life insurance co					
θ	Depletion					
9	Basis adjustment from sale of property					
10	Adjusted current earnings	333,471			333,471	

LSSSOFTSUBS LSS Software Holdings, Inc and 45-4456934 FYE: 12/31/2016	Consolid	lated Repor
FTE. 12/3/1/2010	PARENT	SUBSIDIARY
	LSS Software Holdings, Inc.	LSS Aircraft Holdings, Inc.
	45-4456934	27-1712275
1 Preadjustment AMTI	385,437	~51,966
ACE Depreciation Adjustment 2 a AMT depreciation	10,142	3,514
2 b ACE depreciation:	20,112	3,319
2 b (1) Post-1993 property	10,142	3,514
2 b (2) Post-1989, pre-1994 property 2 b (3) Pre-1990 MACRS property		
2 b (4) Pre-1990 original ACRS property		
2 b (5) Section 168(f)(1) through (4)		
2 b (6) Other property		
2 b (7) Total ACE depreciation 2 c ACE depreciation adjustment	10,142	3,514
Items Included in Earnings and Profits (EAP)		
3 a Tax-exempt interest income		
3 b Life insurance death benefits 3 c Other life insurance distributions		
3 c Other life insurance distributions 3 d Inside buildup of undistributed income		
3 e Other items		
3 f Total increase due to EEP items		
Disallowance of Items Not Deductible From E&P		
4 a Certain dividends received 4 b Public utility dividends		
4 c Dividends paid to an ESOP		
4 d Nonpatronage dividends		
4 e Other items		
4 f Tot due to disallow of nondeduct E&P items Other E&P Adjustments Based on E&P Rules		
5 a Intangible drilling costs		
5 b Circulation expenditures		
5 c Organizational expenditures		
5 d LIFO inventory adjustments 5 e Installment sales		
5 f Total other E&P adjustments		
6 Loss disallowance on exhange of debt pools		
7 Acquisition expenses-life insurance co		
8 Depletion 9 Basis adjustment from sale of property		
10 Adjusted current earnings	385,437	-51,966
and an entitle contract contracts	305,437	-31,300

LSSSOFTSUBS

Form	1120	Consolidated Net Operating Loss Carr	Solars Solars	2016
		For calendar year 2016 or tax year beginning	, ending	
Name			Employer Idea	ntification Number
LSS	Softwa	are Holdings, Inc and Sub	45-4456	934

	IOL Before SRLY Limit	Consolidated	Consolidated	NOL Carryover	Carryover
	NOL After SRLY Limit	Adjustments	NOL Available	Utilized	to Next Year
19th 12/31/97					
18th 12/31/98					
17th 12/31/99					
16th 12/31/00					
12/31/00 15th 12/31/01					
14th 12/31/02					
13th 12/31/03					
12th 12/31/04					
11th 12/31/05					
10th 12/31/06					
9th 12/31/07					
12/31/08					
7th 12/31/09					
6th 12/31/10					
5th 12/31/11					
4th 12/31/12	35,257 35,257		35,257	35,,257	
3rd 12/31/13	175,008 175,008		175,008	175,008	
2nd 12/31/14	137,364 137,364		137 ,364	122,926	14,438
1st 12/31/15	35,626 35,626		35,626		35,626
	ilable To Current Year		383 ,255		
Current Year Income/(Loss)	333,191			333 ,191	(
NOL Carryover Ava	nilable To Next Year				
					50 ,0

LSSSOFTSUBS

Form	1120	Consolidated Net Operating Loss Carryo	over Worksheet - AMT	2016
		For calendar year 2016 or tax year beginning	ending	
Name			Employer le	dentification Number
LSS	Softwa	re Holdings, Inc and Sub	45-445	6934

Preceding	NOL Before SRLY Limit/	Consolidated	Consolidated	NOL Carryover	Саптуочег
Taxable Year	NOL After SRLY Limit	Adjustments	NOL Available	Utilized	to Next Year
9th					
12/31/97					
8th					
12/31/98		745			
7th 12/31/99				1	
12/31/99 6th					
12/31/00					
5th			<u> </u>		
12/31/01				1	
4th					
12/31/02					
3th					
12/31/03					
2th					
12/31/04					
1th					
12/31/05					
Oth .					
12/31/06					
th	4				
12/31/07					
th 19/21/00					
12/31/08					
th 12/31/09					
th					
12/31/10					
th	24,481			Pa	
12/31/11	24,481		24,481	24,481	
th	37,006				
12/31/12	37,006		37,006	37,006	
rd	180,289				
12/31/13	180,289		180,289	180,289	
nd	137,364				
12/31/14	137,364		137,364	58,348	79,01
st	35,346				
12/31/15	35,346		35,346		35,34
iÓi Camavar A	vailable To Current Year				
			414,486		
urrent Year	0				
	300,124			300,124	
IOL Carryover A	vailable To Next Year				
					114,36

FYE: 12/31/2016

Statement 1 - Form 1120. Page 1. Line 10 - Other Income

Description	 mount
LSS Software Holdings, Inc.	
Sales Tax Vendor's Credit	\$ 1,144
Total	\$ 1,144

Statement 2 - Form 1120, Page 1, Line 26 - Other Deductions

Description		Amount
LSS Software Holdings, Inc.		
Management Fee - Lean Bank Charges and Fees Insurance Office Expenses Professional Fees Travel Commissions Payroll Administration Utilities Subtotal	\$	1,223,491 601 16,962 33,792 166,468 43,943 30,000 8,404 12,699 1,536,360
LSS Aircraft Holdings, Inc.		
Insurance Airplane Expenses Bank Charges	_	4,000 44,392 60
Subtotal	_	48,452
Total	\$	1,584,812

FYE: 12/31/2016

Statement 3 - Form 1120, Page 5, Schedule L, Line 14 - Other Assets

Description		Beginning of Year		End of Year
LSS Software Holdings, Inc.				
Due From LSS AC Loan Receivable - Other Loan Receivable - FOL	\$	322,146 120,000 10,000	\$	369,896 0 0
Subtotal		452,146		369,896
LSS Software Elimination Company				
Due From LSS AC		-322,146	-	-369,896
Subtotal	_	-322,146		-369,896
Total	\$	130,000	\$	0

Statement 4 - Form 1120, Page 5, Schedule L, Line 18 - Other Current Liabilities

Description	 Beginning of Year	End of Year
LSS Software Holdings, Inc.		
Deferred Revenue Sales Tax Payable	\$ 205,834	\$ 271,358 53,029
Total	\$ 205,834	\$ 324,387

FYE: 12/31/2016

Statement 5 - Form 1120. Page 5. Schedule L. Line 21 - Other Liabilities

Description	3	Beginning of Year	End of Year
LSS Software Holdings, Inc.			
Loan Payable - Bjorn	\$	17,000	\$ 17,000
Subtotal	_	17,000	17,000
LSS Software Elimination Company			
Due to LSS Holdings		-322,146	-369,896
Subtotal	_	-322,146	-369,896
LSS Aircraft Holdings, Inc.			
Due to LSS Holdings		322,146	369,896
Subtotal		322,146	369,896
Total	\$	17,000	\$ 17,000

FYE: 12/31/2016

Regular Depreciation Statement 6 - Form 4562. Part I. Line 6 - Section 179 Expense

Description of Property	Cost		Cost Expense	
LSS Software Holdings, Inc.				
Furniture and Fixtures	\$	7,586	\$	7,586
Furniture and Fixtures Furniture and Fixtures		857 1,584		857 1,584
Furniture and Fixtures	-	115		115
Total	\$	10,142	\$	10,142

FYE: 12/31/2016

Statement 7 - Form 5472 - Consolidated Return Information

Name	of
Com	ė.

-	Address	City	State	Zip	EIN	Included in Const 5472?
LSS Software	Holdings, Inc. 159 Linwood Avenue	Buffalo	NY	14209	45-4456934	Yes
LSS Aircraft	Holdings, Inc. 159 Linwood Avenue	Buffalo	NY	14209	27-1712275	No

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FYE: 12/31/2016

Statement 8 - Form 5472, Part II, Line 3a - Attribution of Ownership Explanation

Lean Software Holdings, Inc and Sub is owned 100% by Lean Software Services, Inc, a Canadian corporation. Lean Software Services, Inc is greater than 25% owned by Bjorn Larsen, a Canadian citizen, making him the ultimate 25% shareholder.

FYE: 12/31/2016

Statement 9 - Form 5472 - Consolidated Return Information

Name	of
Com	

	Address	City	State	Zip	EIN	Included in Consl 5472?
	Holdings, Inc. 159 Linwood Avenue	Buffalo	NY	14209	45-4456934	Yes
LSS Aircraft	Holdings, Inc. 159 Linwood Avenue	Buffalo	NY	14209	27-1712275	No

9

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

45-4456934

Federal Statements

FYE: 12/31/2016

Statement 10 - Form 5472. Part II. Line 3a - Attribution of Ownership Explanation

Lean Software Holdings, Inc and Sub is owned 100% by Lean Software Services, Inc, a Canadian corporation. Lean Software Services, Inc is greater than 25% owned by Bjorn Larsen, a Canadian citizen, making him the ultimate 25% shareholder.

FYE: 12/31/2016

Form 1120, Page 1, Line 1a - Gross Receipts or Sales

Description	 Amount
LSS Software Holdings, Inc.	
Gross receipts	\$ 2,835,938
Total	\$ 2,835,938

Form 1120, Page 1, Line 1b - Returns and Allowances

Description	A	mount
LSS Software Holdings, Inc.		
Returns and allowances	\$	5,448
Total	\$	5,448

Form 1120, Page 1, Line 5 - Interest

Description	 mount
LSS Software Holdings, Inc.	
Other interest	\$ 3,000
Total	\$ 3,000

Form 1120. Page 1. Line 17 - Taxes and Licenses

Description	Amount
LSS Software Holdings, Inc.	
Payroll Tax Taxes & Licenses	\$ 43,523 15,518
Total	\$ 59,041

Form 1120, Page 5, Schedule L. Line 2a - Trade Notes and Accounts Receivable

Description	В	eginning of Year	 End of Year
LSS Software Holdings, Inc.			
Accounts receivable	\$	29,576	\$ 229,218
Total	\$	29,576	\$ 229,218

45-4456934

FYE: 12/31/2016

Form 1120, Page 5, Schedule L, Line 19 - Loans from Shareholders

Description	E	Beginning of Year	 End of Year
LSS Software Holdings, Inc.			
Loans from shareholder	\$	365,700	\$ 490,402
Total	\$	365,700	\$ 490,402

45-4456934

FYE: 12/31/2016

Form 4626, Page 1, Line 2a - Depreciation of Post-1986 Property

Description	An	nount
LSS Aircraft Holdings, Inc.		
Non-Passive Activities	\$	280
Total	\$	280

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Consolidated NOL	Carryover Wrk -	- PY Allocatio	n of Net Opera	ting Loss Utilized

Taxable Year		rporation Name		Remaining CY Income to		Member NOL After SRLY Limit	Total NOL After SRLY Limit	PY NOL Utilized Allocated to Member
	LSS Software		Inc an	\$	333,191		\$	\$
12/31/12	LSS Aircraft	Holdings,	Inc.			35,257	35,257	35,257
	LSS Software	Holdings,	Inc an		297,934			
12/31/13	LSS Software	Holdings.	Inc.			115,043	175,008	115,043
12/31/13	LSS Aircraft					59,965	175,008	59,965
,,	LSS Software				122,926		,	•
12/31/14	LSS Software		Inc.		,	89,965	137,364	80,509
12/31/14	LSS Aircraft		Inc.			47,399	137,364	42,417
12/31/15	LSS Aircraft		Inc.			35,626	35,626	12, 12,
12/31/13					0	33,020	33,020	
	LSS Software	Holdings,	inc an		0			
Total								\$ 333,191

FYE: 12/31/2016

Consolidated NOL Carryover Wrk - CY Allocation of NOL Utilized and Income Offset

Taxable Year	Corporation Name		NOL Utilized urrent Year	/ear Member ne/(Loss)	Amount of mom Members	CY NOL Utilize	
12/31/16 LSS	Software Holdings,	, Inc.	\$ 385,437	\$ 385,437	\$ 385,437	, \$	-385,437
12/31/16 LSS	Aircraft Holdings	, Inc.	385,437	-52,246	385,437		52,246
Total						ş	-333,191

FYE: 12/31/2016

			4.1		
Consolidated AMT I	101 0	- 10t-l- PM	A Hannathan	AC MICH	RAZET
CORROWATED ANTI	NII I SIFFUANK	AL MALK - MA	Augeanon	OT MI II	HITHITAN

Taxable Year	Corporation Name	Remaining CY Consolidated Income to be Offset	Member NOL After SRLY Limit	Total NOL After SRLY Limit	PY NOL Utilized Allocated to Member
	LSS Software Holdings, Inc an	\$ 300,124	\$	\$	\$
12/31/11	LSS Aircraft Holdings, Inc.		24,481	24,481	24,481
	LSS Software Holdings, Inc an	275,643			
12/31/12	LSS Aircraft Holdings, Inc.		37,006	37,006	37,006
	LSS Software Holdings, Inc an	238,637			
12/31/13	LSS Software Holdings, Inc.		120,324	180,289	120,324
12/31/13	LSS Aircraft Holdings, Inc.		59,965	180,289	59,965
	LSS Software Holdings, Inc an	58,348			
12/31/14	LSS Software Holdings, Inc.		89,965	137,364	38,214
12/31/14	LSS Aircraft Holdings, Inc.		47,399	137,364	20,134
12/31/15	LSS Aircraft Holdings, Inc.		35,346	35,346	
	LSS Software Holdings, Inc an	0			
Total					\$ 300,124

LSSSOFTSUBS LSS Software Holdings, Inc and Sub

Federal Statements 45-4456934

FYE: 12/31/2016

Taxable Year Corporation Name		NOL Utilized		Member 90% Limit		Amount of From Members	NOL Utilize	d (Inc Offset) Member
12/31/16 LSS Software Holdings, I	nc.	\$ 352,090	\$	346,893	s	346,893	\$	-352,090
12/31/16 LSS Aircraft Holdings, I	nc.	352,090		-51,966		346,893		51,966
Total							\$	-300,124

Consolidated AMT NOL Carryover Wrk - CY Alloc of NOL Utilized and Income Offset

FYE: 12/31/2016

Sal	brie	96 5	mid	Wa	des
777	LOHE IS	-9-3	HV.	41.61	463

Description	 Amount	
LSS Software Holdings, Inc.		
	\$ 716,171	
Total	\$ 716,171	

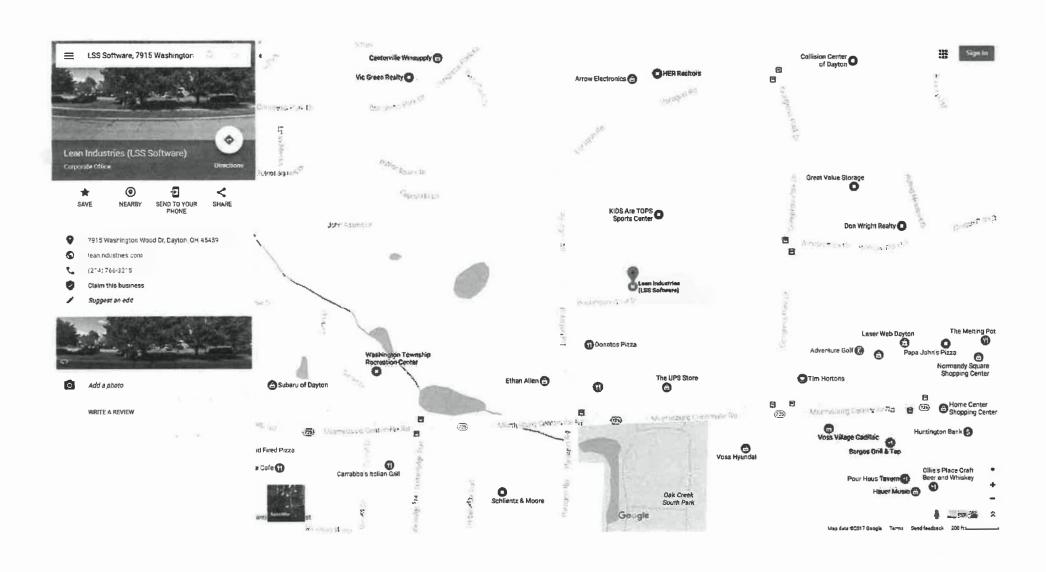
Advertising

Description			Amount		
LSS	Software	Holdings,	Inc.		
				\$	1,666
Tota	al			\$	1,666

Employee benefits

Description		Amount	
LSS Software Holdin	gs, Inc.		
		\$	91,225
Total		\$	91,225

Exhibit M



PARAGON OFFICE CONDOMINIUMS OFFICE LEASE AGREEMENT

THIS LEASE made and entered into this 30 th day of October 2014 by and between Nancy FIRSDON, hereinafter referred to as "Lesser", and LSS Software Holdings, inchereinafter referred to as "Lessee".

I. PREMISES.

Lessor, in consideration of the rents to be paid and covenants performed on the part of the Lessee, does hereby lease to the Lessee the following premises:

Office space located at 7915 Washington Woods Drive, Washington Township, Montgomery County, and State of Ohio, containing more or less 2450 square feet. The office space described and the appurtenances thereto are sometimes hereinafter referred to as the "Space".

II. TERM.

The term of this lease shall begin on day 15 of November 2014 and continue for a period of 96 months to be fully completed by 15 November 2017.

III. BASE RENTAL RATE.

Lessee shall pay to Lessor as and for rental on the premises commenting on 1st November 2014 the sum of ninety thousand Dollars (\$90,000.00) payable in annual installments of thirty thousand dollars (\$ 30,000.00)

All payments of rent shall be made payable to Nancy. Firsdon, 7989 Washington Woods Drive, Dayton, Ohio 45459.

A \$ 2,500.00 deposit is to be held by lessor and submitted by lessee prior to possession. Deposit will be returned to lessee within 30 days from move out provided the office space is returned in the same condition as it was received allowing for normal wear and tear. If damage does occur then repairs will be deducted from the deposit.

IV. UTILITIES.

Lessor shall, during the term hereof, pay all charges for gas, electricity, light, heat or power rendered or supplied upon or in connection with the leased premises at 7915 Washington Woods Dr. which are levied or charged against said premises throughout the term of this Lease.

- A. The electric utility meter and invoices for the Space shall be in the name of the Lessor who shall be solely responsible and make direct payments to the utility companies;
- B. The water utilities shall be in the name of the Lessor. In no event shall Lessor be liable for the quality, quartity, fallure or interruption of such service to the demised premises which are a result of actions by utility suppliers, governmental laws, regulations or ordinances, or other matters beyond the control of the Lessor otherwise.

c. A \$ 250.00 per month allowance towards gas and electric is included in the lease payment. At the end of each year the lessor will bill the lessee for the utilities that exceed \$ 3,000.00 per year.

V. CONDOMINIUM.

- A. Lessee acknowledges that the Space is a condominium unit, and in addition to the covenants and restrictions contained in this Lease, the use of the Space is also subject to the covenants, conditions and restrictions contained in the Declaration of Condominium for Paragon Plaza Office Condominium Association, Inc., hereinafter referred to as "Declaration", the by-laws and Articles of incorporation for Paragon Plaza Office Condominium Association, Inc., hereinafter referred to as the "Association", or any rules and regulations adopted or hereinafter adopted by the Board of Trustees of the Association.
- B. Lessee hereby acknowledges that Lessor has furnished it with a copy of the Declaration, by-laws, Articles of Incorporation and rules and regulations. Lessee further agrees to comply with the provisions of such documents, and to require compliance by its agents, employees or invitees.
- C. During the term of this Lease, Lessor agrees to pay, when due, any and all monthly, periodic and special assessments, which may be charged, against the Space by the Association.

V1. USE AND OCCUPANCY.

- A. Lessee shall use and occupy the Space for Business Office. Lessee shall, at his own expense, comply with all requirements of the law and with all ordinances, statutes, regulations, directives, orders, or other lawful enactment's or pronouncements of any Federal, State, Municipal or other lawful authority affecting the Space, and of any insurance company insuring the building of which the Space is a part insuring the Lessor against liability for accident or injury in or upon said building, and shall hold Lessor in all respects harmless therefrom; provided, however, that Lessor warrants that the Demised Premises shall be or are in compliance with all of the foregoing requirements, and Lessor agrees to hold Lessee harmless for a breach of this warranty.
- 8. Lessee shall not operate electric or kerosene space heaters within the Space or Demised Premises without the express written approval of the Lessor.
- C. Lessee shall further obtain and maintain in effect all permits and licenses necessary for the operation of the Lessee's business as herein provided. Lessee shall pay all fees and taxes arising out of its business or its use and occupancy of the Space.
- D. Lessee shall provide, at its own expense, vinyl, fiberboard or plywood chairs floor mats for all secretarial and/or executive type chairs. Caster cups or suitable heavy-duty pads shall also be provided by the Lessee for all other equipment within the New Space or Demised Premises to prevent carpet damage.
- E. Lessor shall provide adequate parking spaces for the use of Lessee's employees and clients.

VIII. JANITORIAL SERVICES.

Lessee shall provide complete janitorial service for the space.

DI, REPAIRS AND MAINTENANCE.

A. Lessor shall maintain and keep in good state of repair the interior of the Space or Demised Premises, including all fixtures and appliances therein and all mechanical installations therein.

B. Lessee shall make no structural alterations in the Space or Demised Premises without the prior written approval of Lessor. All alterations, additions or improvements made thereon at any time shall remain upon the Space and shall be surrendered as part of the real estate to the Lessor at the end of the term of this Lease or any renewal or extension thereof provided that Lessee shall be entitled to remove and retain its own property and all of its trade fixtures. Notwithstanding written approval of the Lessor, Lessee shall be responsible for neturning the Space to its original-condition upon request of Lessor without any cost whatsoever to the Lessor.

C. Lessee shall, at the expiration of this Lesse, or any renewal or extension thereof, surrenders the Space to the Lessot in as good condition as they are now, ordinary wear and tear and damage by casualty excepted.

- D. Lessor shall be responsible for maintaining the structural and roof components of the building of which the Demised Premises are a part, and of all major repair or replacement of the plumbing, heating and air conditioning equipment providing that such repair or replacement is not caused by the negligence of the Lessee.
- DI. Lessee is responsible for replacing light bulbs in fixtures and exit signs

X. SIGNS.

Lessor, at Lessee's cost, shall provide all signage within the limits of the Washington Township zoning code. The erection of any additional signs on any part of the Space or upon any part of the common area shall be done only upon the prior approval of Lessor in writing which consent shall not be unreasonably withheld.

XI. COMMON AREAS.

Lessor will operate and maintain the common area, which shall include the parking lot, driveways, and walkways. Lessor shall at all times have the exclusive control and management of said common areas and shall have the right, from time to time, to establish, modify and enforce reasonable rules and regulations with respect to all facilities and areas provided in said common areas.

XII. INSURANCE.

A. During the term of this Lease, the Lessor shall provide all risk coverage and maintain with \$250,000.00 legal liability limits.

B. During the term of this Lease, the Lessee at its own cost and expense shall provide and maintain comprehensive public insurance, including property damage, in limits of not less than \$250,000.00 with respect to personal injury, death or property damage in any accident with the loss payable clauses in favor of both the Lessor and Lessee as their interests appear. Lessee shall deliver to the Lessor the aforesaid policies of insurance (except that Lessee may deliver certificates evidencing such insurance in the event blanket policies have been issued), with proof of payment of the premiums therefor, at or before the commencement of the terms hereof, and renewal policies (or certificates) at least thirty (30) days prior to the expiration of any such policy. If Lessee falls to do so, the Lessor may pay such premiums therefor and Lessee shall reimburse Lessor for all monies expended by Lessor for that purpose, with

interest at the rate of six percent (6%) per annum, which may be added to and be collectible as additional rent hereunder.

C. Lessee agrees not to knowingly violate or permit to be violated any of the conditions or provisions of the insurance policies required to be furnished hereunder, and agrees to promptly notify Lessor of any fire or casualty. Lessor agrees not to knowingly increase the hazards on the leased premises by any of Lessor's own acts. Lessee and Lessor agree to comply with the requirements of any companies issuing such policies in order to keep the insurance in full force and effect. In the event that any policy shall be cancelled for noncompliance with the conditions or provisions of said policies, or requirements of the insurance companies or in the event that Lessee falls to notify the insurance companies of any claims which may arise in accordance with the terms of said insurance, then, and in that event, Lessee agrees to indemnify and save harmless Lessor from any claims and/or damages whatsoever which would otherwise be covered by said insurance, including reasonable counsel fees incurred or expended by Lessor in connection herewith.

D. Each party hereto waives any and every claim which arises or may arise in its favor against the other party hereto during the term of this Lease or any renewal or extension thereof within or upon, or constituting a part of, the premises leased to Lessee hereunder, which loss or damage is covered by valid and collectible fire and extended coverage insurance policies, to the extent that such loss or damage is recoverable under said insurance policies. Said mutual waivers shall be in addition to, and not in limitation or derogation of, any other waiver or release contained in this Lease with respect to any loss of, or damage to, property of the parties hereto. Inasmuch as the above mutual waivers preclude the assignment of any aforesaid claim by way of subrogation (or otherwise) to an insurance company (or any other person), each party hereto hereby agrees immediately to give each insurance company which has issued to its policies of fire and extended coverage insurance, written notice of the terms of said mutual waivers, and to have said insurance policies properly endorsed, if necessary, to prevent the invalidation of said insurance coverage's by reason of said waivers.

XIII. FIRE AND OTHER DESTRUCTION.

A. In the event that the Space or the building of which the Space are a part are destroyed or are damaged so that they could not be repaired or reconstructed with reasonable diligence being exercised, it is agreed that this Lease will terminate, and the Lessee shall immediately surrender the Space or Demised Premises to the Lessor and pay rent to the date of such surrender.

B. In the event of a partial destruction or damage to the Space, or the building which the Space is a part, and the Lessee being able to use the Space or any part thereof, pending repairs or reconstruction, the Lease shall continue in effect and Lessor shall immediately restore the premises to its original condition. However, rent shall be reduced in proportion to the number of square feet of floor space made unusable as is related to the total number of square feet of floor space included in the Space until such repairs are completed.

C. All personal property of the Lessee whatsoever kept in the Space or Demised Premises shall be at the Lessee's sole risk and the Lessor shall not be liable for any damage done to or loss of such personal property or loss suffered by the business or occupation of the Lessee arising from any act of negligence of co-tenants or the occupants of the building, or from bursting, overflowing or leading of water, sewers, sprinkler system or steam pipes or from the heating or plumbing fixtures or from electric wires, or from

gas, or odors, or by reason of the failure of heat, water, gas, electricity or caused in any other manner whatsoever, excepting therefrom the negligence of the Lessor.

XIV. DEFAULT.

A. If the Lessee shall default in payment of rent, and not cure said default within seven (7) days after written notice, or otherwise fall to perform, or shall violate any of the terms, conditions, rules or requirements of this Lease and shall not cure said default within three (3) days after written notice (or such length of time if reasonable under the circumstances), then the Lessor may forthwith reenter and take possession of the Space or Demised Premises with or without force, for the remainder of the unpaid term, and credit Lessee with net rentals therefrom; or at the option of the Lessor it may cancel or terminate this Lease and only the statutory three (3) day notice shall be required to so terminate this Lease, or for the Lessor to repossess itself of the Space or Demised Premises, or to bring and maintain an action of forcible entry and detainer. Said three- (3) day notice may be served by attaching or leaving same on the Space or Demised Premises.

B. Lessee agrees to quietly deliver up the premises at the expiration of this lease in as good condition as when taken, or as they may be put in, reasonable wear and tear and damage by casualty excepted.

C. It is mutually agreed and covenanted between the parties hereto that if the rent shall at any time be in arrears and unpaid, or if any breach of any of the covenants and agreements on the part of the Lessee herein contained shall occur, or if the Lessee shall be declared bankrupt or insolvent or if any assignment of the Lessee's property shall be made for the benefit of creditors or otherwise, or if the lessehold interest herein shall be levied on under execution, or a petition filed to declare the Lessee bankrupt or a receiver or trustee in bankruptcy be appointed for Lessee, whether under the operation of State or Federal laws, then and in that case, the Lessor may at its own option immediately and without notice to the Lessee or any other person or persons, terminate this Lease, and the Lessee will at once surrender possession of said Space to the Lessor and remove all effects therefrom, and if possession of said Space by said Lessee be not immediately surrendered, the Lessor may forthwith re-enter said Space, and repossess itself thereof, and exclude said Lessee and remove all persons and effects therefrom, using such force as may be necessary, without being deemed guilty of any manner of trespass or forcible entry or detainer. The Lessee expressly waives the service of any notice or intention to terminate this Lease (except as expressly required by this Lease), or to reenter said Space and waives the service of any and every other notice or demand prescribed by any statutes or other law (except as expressly required by this lease), and agrees that the simple breach of any of the said covenants shall of itself without the service of any notice (except as expressly required by this Lease) or demand whatever constitute a forcible detainer by the Lessor of said Space within the meaning of the statutes of the State of Ohio.

D. Lessee shall not vacate or abandon the Space any time during the term hereof, and if the Lessee shall so vacate or abandon, any property of the Lessee left on the premises shall be deemed to have been abandoned and may either be retained by the Lessor as Lessor's property or may be disposed of at public or private sale as the Lessor sees fit. If such property of the Lessee or any part thereof is sold at public or private sale or retained by the Lessor, the proceeds of such sale or then current fair market value of the property, as the case may be, shall be applied by the Lessor against Lessor's expenses of removal, storage, or sale, the arrears of rent or future rent payable herein, and any other damage to which Lessor may be entitled hereunder.

XV. LESSEE TO SAVE LESSOR HARMLESS.

Lessee will indemnify and save harmless Lessor against and from all expenses, liabilities, obligations, damages, penalties, claims, accidents, costs and expenses, including reasonable attorney's fees, paid suffering, or incurred for death or damage or injury to persons or property in whole or in part as a result of any breach by Lessee, Lessee's agents, independent contractors, servants, employees, or licensees any covenant or conditions of this Lease or the carelessness, negligence, or improper conduct of the Lessee, Lessee's agents, servants, employees, customers, visitors or licensees. Lessee's liability under this Lease extends to the acts and omissions of any subleases, and any agent, servant, customer, employee, visitor or licensee of any sublease. Lessee shall use and occupy the premises and use the portion of the parking space assigned to him in the common area at its own risk.

XVI. ACCESS TO PREMISES.

Lessor of its agent shall have reasonable right to enter upon the leased premises at all reasonable hours for the purpose of inspecting same, or making repairs, additions, or alterations to the Space or Demised Premises or any property owned or controlled by Lessor so long as Lessor observes Lessee's reasonable procedures to protect any of its proprietary or confidential information or trade secrets. Lessee shall have access to the building and the Space or Demised Premises seven (7) days per week, twenty-four (24) hours per day.

XVII. SUBORDINATION.

Upon request of Lessor, Lessee will subordinate its right hereunder to the ilen of mortgage or mortgages to any bank, insurance company, or any lending institution now or hereafter enforced against the land and building of which the Space or Demised Premises are a part or upon any building hereafter placed upon the land of which the Space or Demised Premises are a part and to all advances made or hereafter to be made upon the security thereof. This section shall be self-operative, and any mortgagee shall require no further instrument of subordination.

XVIU. WAIVER.

The waiver by the Lessor of the breach of any of the covenants or conditions by the Lessee, or the consent by the Lessor to any assignment by the Lessee, shall not affect the right of remedy of the Lessor for any future breach of assignment without consent, but such right of remedy may be pursued as if no such waiver or consent had been given.

XIX, QUIET POSSESSION.

Lessor agrees with Lessee that the said Lessee, paying the rents and observing and keeping the covenants of this Lesse on Lessee's part to be kept, shall lawfully, peaceably, and quietly hold, occupy, and enjoy said premises during said term without let, hindrance, ejectment or molestation by the said Lessor or by any persons lawfully claiming under it.

XX. SUCCESSORS AND ASSIGNS.

This Lease and all of its terms, covenants, and provisions shall litture to the benefit of and be binding upon the parties and their respective administrators, executors, successors, and assigns, subject to the right to assign as set forth in Paragraph XVIII herein.

XXI. OHID LAWS.

This Lease shall be governed by and construed in accordance with the Laws of the State of Ohio.

XXII. LESSOR'S CONSENT.

Whenever Lesson's consent is required under the terms of this Lease, such consent shall not be unreasonably withheld.

XXIII, DISPOSAL OF WASTE.

The Lessor shall be responsible for proper disposal of all toxic waste, bodily fluids or all other waste classified as "red bag" material.

XXIV. NOTICES.

All notices required under the terms of this Leese shall be given in writing and shall be sent by registered or certified United States mail, return receipt requested, and shall be effective on the date received. Notices to Lessor shall be sent to 7989 Washington Woods Drive, Dayton, Ohio 45459, and notices to Lessee shall be sent to 7915 Washington Woods Dr., Dayton, Ohio 45459 and c/o Drew & Drew ILP at 159 Linwood Ave. Buffalo, N.Y. 14209

XXV. Changes

Lessor shall paint one coat on all walls, with the green painted walls painted as needed.

The lower level carpet to be replaced

Finish the kitchen wall as is

remove the seperation wall between the two offices, so as to make one large office and close off opening

Finish seperation in hall

remove the two large bushes at the front door

IN WITNESSES WHEREOF, the said I written.	lessor has hereunto set his hand on the day and year first above
SIGNED IN THE PRESENCE OF	LESSOR: Maney of Firedon
Jack Williams	Nancy FIRSDON
	*
Public in and for said County and Sta	he day of 10 %, 2014, before the, the subscriber a Notary ste, personally appeared Byron R. Firsdon, the Lassor in the foregoing g thereof to be his voluntary act and deed for the uses and purposes
and year last aforesald. NOTARY PUBLIC	sunto subscribed my name and affixed my official seal on the day A. JACKSON April 17 A. JACKSON April 29, State of Olik April 29, 2016 Since have be reunto set their parids on the day and year first above
written.	LESSEE: LESSEE: LESSEE:
Witness	By Bjorn Larsen , PRESIDENT
Witness	
Netary Public in and for said County a and acknowledged the signing thereo therein mentioned.	As a day of <u>OCT S/OOM</u> , 200, before me, the subscriber a and State, personally appeared, the Lessee in the foregoing Lease, if to be his voluntary act and deed for the uses and purposes unto subscribed my name and affixed my official seal on the day
Shull B	STREAM CONTRACT
NOTARY PUBLIC	Hotery Public, State of Rew York Qualified in Eric County

Exhibit N

Case: 3:19-cv-00084-WHR Doc #: 1-1 Filed: 03/21/19 Page: 183 of 223 PAGEID #: 212

United States Division

BJORN LARSEN CEO & PRESIDENT blarsen@leanindustries.com Toronto JIM SCHLEGEL ABHINAY KONDAMREDDY VICE PRESIDENT, SALES PROJECT ADMINISTRATOR & DELIVERY akondamreddy@leanindustries.com jschlegel@leanindustries.com Toronto Dayton/Cleveland ANGIE NOAH DIANE GRASSI CLAUDIO LOPES CHRIS MAHY * DIRECTOR, CLIENT MANAGER, BUSINESS DIRECTOR, EUROPEAN DIRECTOR, CLIENT SERVICES IMPLEMENTATIONS **OPERATIONS OPERATIONS** & OPERATIONS anoah@leanindustries.com dgrassi@leanindustries.com clopes@leanindustries.com cmahy@leanindustries.com Dayton Dayton/Cleveland Portugal Taronto Colleen Ryan KALYANI LANKA MIGUEL SILVA MANAGER, BUSINESS CLIENT SUPPORT SPECIALIST MANAGER, CLIENT ANALYSIS klanka@leanindustries.com **IMPLEMENTATIONS** cryan@leanindustries.com Toronto msilva@leanindustries.com Dayton Portugal SUJIT PAUDYAL **BRENDA WHITING** CLIENT SUPPORT SPECIALIST SR. BUSINESS ANALYST spaudyal@leanindustries.com bwhiting@leanindustries.com Toronto Dayton SAMI EL-MASRI DAVID SMITH AMANDA COX CLIENT SUPPORT SPECIALIST **BUSINESS ANALYST** selmasri@leanindustries.com **BUSINESS ANALYST** dsmith@leanindustries.com acox@leanindustries.com Toronto Dayton **CORRINA PALAEZ GAIL MEADOWS** SETH WEEKS CLIENT SUPPORT SPECIALIST cpalaez@leanindustries.com BUSINESS ANALYST JR. BUSINESS ANALYST gmeadows@leanindustries.com Dayton sweeks@leanindustries.com Toronto TA'NISHA WATSON **BUSINESS ANALYST** twatson@leanindustries.com DAVE PATRICK **BUSINESS ANALYST** dpatrick@leanindustries.com 👉 indicates Manager

Exhibit O

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ABOUT ETHOCA

WHAT WE DO

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PARTNERS

Ethoca & Lean Industries Partner for Faster, Easier Resolution of Fraud and Cardholder Disputes

OCTOBER 3, 2016





Integration Enables Card Issuers to Automate Dispute and Fraud Related Recoveries, Eliminate Operational Costs Associated with Chargebacks and Preserve Customer Experience

TORONTO, Ontario, Canada; Austin, TX; and London, UK - October 3, 2016 - Ethoca, the industry standard for collaboration-based technology solutions that enable card issuers and online merchants to increase card acceptance and stop ecommerce fraud and disputes, today announced a partnership with Lean Industries, a leading provider of dispute management software solutions. Now any card issuing bank using Lean's AdjustmentHub™ dispute processing platform will be able to automatically connect to Ethoca's Global Collaboration Network to easily resolve fraud and customer disputes - avoiding the costly and labor intensive chargeback process entirely.

With customer experience and maintaining top position in the cardholder's wallet as chief concerns, card issuers also struggle to cope with the increasing volume of costly fraud claims and dispute cases that put additional pressure on operating margins. Ethoca's flagship service - Ethoca Alerts - solves this problem by giving merchants an early warning on customer disputes and fraudulent transactions that have already been confirmed by the bank with their cardholders, Merchants act on alerts immediately by stopping the fulfilment of fraudulent orders and issuing cardholders a refund to avoid the costly chargeback process, This in turn enables card issuers to eliminate operational costs associated with chargebacks and speeds the recovery of dispute and fraud losses, while ensuring a better experience for cardholders.

To increase the level of automation and speed of resolution for disputed transactions, AdjustmentHub will send disputed transaction data to Ethoca in near real time, After Ethoca's merchant customers resolve the cardholder's reason for dispute by issuing a refund, Ethoca Alerts sends the response back to AdjustmentHub, where the open dispute case will be updated to reflect the successful outcome of the issuer-merchant collaboration. This seamless, end-to-end process ensures no chargeback will be processed. AdjustmentHub from Lean Industries is used to manage tens of thousands of disputes each month across its

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pr@ethoca.com

issuing customer base and the integration with Ethoca Alerts is available for issuing customers worldwide.

"We make participation in the Ethoca Network virtually effortless for our card issuer customers — with no added IT burden or heavy integration required to start seeing value day one," said Trevor Clarke, Co-Founder and EVP, Issuer Relations at Ethoca, "Through our integration with AdjustmentHub, card issuers can make their entire fraud and dispute recovery process faster, easier, more accurate and more cost-effective, while creating a vastly improved experience for cardholders, Card issuers can also recover a wider range of disputed transactions, including low value and 3DS purchases that are typically non-recoverable,"

"We share a common mission with Ethoca: our companies seek to provide faster, lower-cost dispute resolution and fraud mitigation services for the card issuing community," said Lean Industries Chief Executive Officer, Bjorn Larsen. "Together, Lean Industries and Ethoca will increase the level of interaction between card issuers and merchants, empowering both parties to reduce the impact of costly and lengthy fraud and dispute handling processes."

Ethoca's global network is growing quickly around the world and includes the largest merchant and card issuer footprint in the industry. Merchant coverage includes seven of the top ten ecommerce merchants, the world's largest digital goods brands, and more than 137,000 enrolled merchant descriptors. More merchant participation drives dramatically higher fraud and dispute related recoveries for Ethoca's card issuer customers, now numbering more than 555 worldwide, These include 14 of the top 20 North American card issuers (including three of the top four in the U.S.), 21 in EMEA (including nine in the UK), nine in Canada, two of the top four in Australia, and more. Ethoca's Global Network now spans more than 37 countries.

About Ethoca

Ethoca is the leading, global provider of collaboration-based technology that enables card issuers, ecommerce merchants and online businesses to increase card acceptance, stop more fraud, recover lost revenue and eliminate chargebacks from both fraud and customer service disputes. Through the Ethoca Network – the first and only of its kind in the industry – we are closing the information gap between card issuers and merchants. This unique capability makes fraud and customer dispute insight available and actionable in real time. Our suite of services delivers significant revenue growth and cost saving opportunities to our card issuer and merchant customers around the world. Seven of the top ten ecommerce brands, 14 of the top North American card issuers, two of the top five UK card issuers and more than 4,700 ecommerce businesses around the world rely on Ethoca solutions and the network that powers them. To find out more, please visit us online at www.ethoca.com.

About Lean industries

Lean Industries develops and delivers software solutions designed to lower the costs and improve the quality of managing disputes, exceptions and adjustments for electronic payment transactions. Our solutions enable organizations of all types and sizes to become highly efficient and productive through extensive process automation, elimination of paper-based practices, and integration with critical enterprise payment applications. Our people are experts in this field and provide implementation, training and customization services to match your company's needs. For more information, visit: www.leanindustries.com.

Ethoca & Lean Industries Partner for Faster, Easier Resolution of Fraud and Cardholder ... Page 3 of 3

Media Contacts

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+44 (0) 7738 822 956 / angela@skyparlour.com

Keith Briscoe

Chief Marketing Officer, Ethoca Direct; +1.416.628,5052 Mobile: +1,416,312.8105 keith.briscoe@ethoca.com

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(323) 655-5789



Press Releases

Chargeback Dispute Automation – Verifi and Lean Industries Announce Partnership

Companies enhance chargeback dispute automation for card issuers

Los Angeles, CA & Toronto, ON – 2 April 2014: Verifi Inc., a leading provider of global electronic payment and risk management solutions for card-not-present merchants, and Lean Industries, provider of the AdjustmentHub(TM) dispute management system, today announced the formation of a chargeback dispute automation partnership that expands the opportunities for card issuers to improve the automation and resolution success rates of cardholder disputes.

As part of this partnership, Lean Industries will develop an automated interface that will access the Verifi Cardholder Dispute Resolution Network® (CDRN®) for card issuers from within their AdjustmentHub application. To increase the level of automation and speed of resolution for disputed payments, AdjustmentHub will obtain qualifying merchant information from Verifi and automatically submit disputed payment records to the CDRN service from issuers using both solutions. Merchant responses to these resolution requests submitted through

CDRN back to the issuer will automatically update dispute case information in AdjustmentHub and prompt users to proceed with each case accordingly.

Combined, the two companies currently serve many large card issuers. AdjustmentHub from Lean Industries is used to manage tens of thousands of disputes each month across its issuing customer base. Verifi enables thousands of CNP merchants to successfully resolve disputed transactions (chargeback disputes) before they are processed as chargebacks by card issuers. These merchants include most of the Internet Retail 500 as well as hundreds of specialty CNP merchants in telecom, cable, SaaS, DRTV and other markets.

"This partnership represents a movement for cross-industry collaboration to minimize the costs of handling disputed payments," said Matthew Katz, Chief Executive Officer and founder of Verifi. "The alliance expands the access of our CDRN service and, together, we're better positioned to facilitate interactions between card issuers and merchants."

"This is an innovative initiative for both companies as we seek to provide faster, low-cost dispute resolution services for the card issuing community," said Lean Industries Chief Executive Officer, Bjorn Larsen. "Together, Lean Industries and Verifi will increase the level of interaction between card issuers and merchants, empowering both merchants and issuers to reduce the impact of costly and lengthy dispute handling processes."

ABOUT LEAN INDUSTRIES

Lean Industries develops and delivers software solutions designed to lower the costs and improve the quality of managing disputes, exceptions and adjustments for electronic payment transactions.

Our solutions enable organizations of all types and sizes to become highly efficient and productive through extensive process automation, elimination of paper-based practices, and integration with critical enterprise payment applications. Our people are experts in this field and provide implementation, training and customization services to match your company's needs.

About Verifi

Verifi, an award-winning provider of end-to-end payment protection and management solutions, was founded in 2005 to help our clients effectively manage the payments challenges they face every day. Verifi helps merchants safely process payments, combat fraud, prevent and resolve costly chargebacks, as well as increase billings and keep loyal customers. Our best-in-breed solutions and white glove support are trusted by a wide range of industries from emerging companies to the Fortune 500. Headquartered in Los Angeles, California, we process more than \$20 billion transactions annually and currently serve more than 12,000 accounts globally. For more information, visit:www.verifi.com.

###

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CONTACT

Main Phone: (323) 655-5789 Mon-Fri: 8:00PST - 5:00PST

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LOS ANGELES, CA and TORONTO, ON--(Marketwired - May 2, 2014) - Verifi Inc., a leading provider of global electronic payment and risk management solutions for card-not-present merchants, and Lean Industries, provider of the AdjustmentHub™ dispute management system, today announced the formation of a partnership that expands the opportunities for card issuers to improve the automation and resolution success rates of cardholder disputes.

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ABOUT VERIFI

Founded in 2005, Verifi is a full-service provider of global electronic payment and risk management solutions for card-not-present (CNP) merchants. Based on a multi-layered approach, Verifi's risk management solutions empower Merchants to gain control and transparency into the entire payment process -- from global payment Recently Viewed > acceptance and processing, order screening, and recovery/maximization to fraud/risk management and payment security,

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Sebonic Financial	3,602%	3,490% at 0,100 pts Thu May 18	Es
		,	-
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st payment: \$1,369 Lender fees: \$3,319 State Lic # MLB66247 NMLS # 66247 Cardinal st payment: \$1,390 Lender fees: \$3,946 State Lic # ML866247

Cost and Feet

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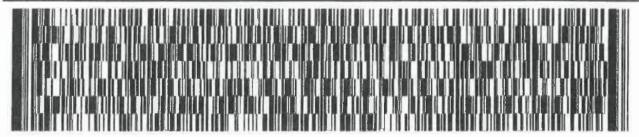


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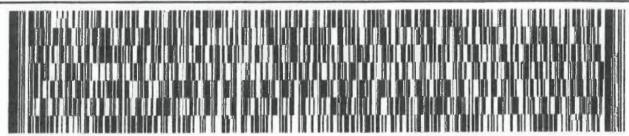
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	rt 1. Informa	tion About Attorney or resentative		art 2. Notice of Appearance as Attorney or ccredited Representative	Ş
1.	USCIS ELIS A	ccount Number (if any)		is appearance relates to immigration matters before lect only one box):	
	me and Addre	ess of Attorney or Accredited	1.a. 1.b.	List the form numbers	
2.a.	Family Name (Last Name)	Behm		Form I-131 I-485 I-765	_
2.b.	Given Name (First Name)	Jennifer	2.a. 2.b.	. List the specific matter in which appearance is entered	
2.c.	Middle Name		1		_
3.a.	Street Number and Name	2300 Wehrle Drive	3.a.	. 🔲 СВР	
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3.d.	State NY	3.e. ZIP Code 14221		request of:	a
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4.	Daytime Teleph	none Number		Family Name LARSEN	_
	7166341010		J	(Last Name)	
5.	Fax Number		5.b.	Given Name (First Name) Bjorn	
	7166341074		5,c.		
6.	E-Mail Address	(if any)	6.	Name of Company or Organization (if applicable)	_
	jebehm@usi	mmlawyer.com	7 0.	Name of Company of Organization (9 applicable)	
7.	Mobile Telepho	ne Number (if any)	_		_



Form G-28 05/05/16 Y

Part 2. Notice of Appearance as Attorney or Accredited Representative (continued)	Part 3. Eligibility Information for Attorney or Accredited Representative
Information About Applicant, Petitioner, Requestor, or Respondent (continued) 7. USCIS ELIS Account Number (if any) 8. Alien Registration Number (A-Number) or Receipt Number	Select all applicable items. 1.a. I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. (If you need additional space, use Part 6.) Licensing Authority
9. Daytime Telephone Number	NYS Ct of Appeals 4th Dept 1.b. Bar Number (if applicable) N/A
 Mobile Telephone Number (if any) 3072756956 E-Mail Address (if any) 	1.c. Name of Law Firm Berardi Immigration Law
Mailing Address of Applicant, Petitioner, Requestor, or Respondent NOTE: Provide the mailing address of the applicant, petitioner, requestor, or respondent. Do not provide the business mailing	1.d. I (choose one) \(\) am not \(\) am subject to any order of any court or administrative agency disbarring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law. If you are subject to any orders, explain in the space below. (If you need additional space. use Part 6.)
address of the attorney or accredited representative unless it serves as the safe mailing address on the application, petition, or request being filed with this Form G-28. 12.a. Street Number and Name 1072 Beryl Trail 12.b. Apt. Ste. Fir. 12.c. City or Town Centerville 12.c. City or Town 12.c. ZIP Code 45459	2.a. I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States, so recognized by the Department of Justice, Board of Immigration Appeals, in accordance with 8 CFR 292.2. Provide the name of the organization and the expiration date of accreditation. 2.b. Name of Recognized Organization
12.f. Province 12.g. Postal Code	2.c. Date accreditation expires (mm/dd/yyyy) ▶
12.h. Country	



Part 3. Eligibility Information for Attorney or Accredited Representative (continued)

3.

I am associated with

the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative is at his or her request.

NOTE: If you select this item, also complete Item Numbers 1.a. - 1.b. or Item Numbers 2.a. - 2.c. in Part 3. (whichever is appropriate).

- 4.a. I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2)(iv).
- 4.b. Name of Law Student or Law Graduate

Part 4. Applicant, Petitioner, Requestor, or Respondent Consent to Representation, Contact Information, and Signature

Consent to Representation and Release of Information

 I have requested the representation of and consented to being represented by the attorney or accredited representative named in Part 1. of this form. According to the Privacy Act of 1974 and DHS policy, I also consent to the disclosure to the named attorney or accredited representative of any record pertaining to me that appears in any system of records of USCIS, ICE or CBP.

When you (the applicant, petitioner, requestor, or respondent) are represented, DHS will send notices to both you and your attorney or accredited representative either through mail or electronic delivery.

DHS will also send the Form I-94, Arrival Departure Record, to you unless you select Item Number 2.a. in Part 4. All secure identity documents and Travel Documents will be sent to you (the applicant, petitioner, requestor, or respondent) at your U.S. mailing address unless you ask us to send your secure identity documents to your attorney of record or accredited representative.

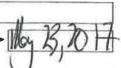
If you do not want to receive original notices or secure identity documents directly, but would rather have such notices and documents sent to your attorney of record or accredited representative, please select all applicable boxes below:

- 2.a I request DHS send any notice (including Form 1-94) on an application, petition, or request to the U.S. business address of my attorney of record or accredited representative as listed in this form. I understand that I may change this election at any future date through written notice to DHS.
- 2.b. I request that DHS send any secure identity document, such as a Permanent Resident Card, Employment Authorization Document, or Travel Document, that I am approved to receive and authorized to possess, to the U.S. business address of my attorney of record or accredited representative as listed in this form or to a designated military or diplomatic address for pickup in a foreign country (if permitted). I consent to having my secure identity document sent to my attorney of record or accredited representative's U.S. business address and understand that I may request, at any future date and through written notice to DHS, that DHS send any secure identity document to me directly.

3.a. Signature of Applicant, Petitioner, Requestor, or Respondent

→ [

3.b. Date of Signature (mm/dd/yyyy)]



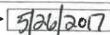
Part 5. Signature of Attorney or Accredited Representative

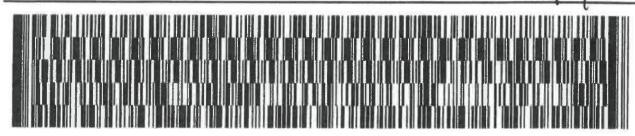
I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. Signature of Attorney or Accredited Representative

2. Signature of Law Student or Law Graduate

3. Date of Signature (mm/dd/yyyy)





Form G-28 05/05/16 Y

Department of Homeland Security
U.S. Citizenship and Immigration Services

OMB No. 1615-0008; Expires 06/30/2017

G-325A, Biographic Information

				_		_				_				
Family Name F	irst Name		Middle N	lame	1	X Ma	ale	Date of Birth (mm/dd/yyyy)	i(izens	hip/Na	lionality	File Number		
LARSEN E	3jorn					☐ Fe	male		Canad	Canada & Norway		way A		
All Other Names Used (include name		ious marriage	s)		Cit	City and Country of Birth				U.S. Sc	cial Security 1	lo. (if any)		
None		_			5	Sandn	es	Norway			0676	02903	ì	
Family Name		First Nam	е	Date of	et.			, and Country of Birth		City	and Cou	ntry of Resider	ice	
Father LARSEN		Torstein	1	11/27	71	927	Sant	ines/Rogaland Norway		Tve	destra	nd Norwa	y	
Mother (Maiden Name) OEGLAND		Kirsten		08/30)/1	931	Sand	medRogeland Norway		Tve	destra	nd Norwa	y	
Current Husband or Wife (If none,		First Nam	e			Birth	Cit	y and Country of Birth	Date	of Marı	inge Pla	ce of Marriage	8	
Family Name (For wife, give maid	en name)			(mm	/da	(lyyyy)			1					
None		1							1					
Former Husbands or Wives (If non- Family Name (For wife, give maids		First Name		Date of I (nim/dd/)			Date	and Place of Marriage		Date an Macria		of Termination	of	
COLLUM		Nancy Jo		05/19/	19	57	05/2	8/2005 Denton, Te	Kas	02/04/2	2010 C	ollin County	, Texas	
PUSIC		Majda		01/30/	19	54	12/3	1/1984 North York, ON,	Cenada	06/29/2	2003 To	oronto, ON,	Canada	
Applicant's residence last flve	years. Li	st present a	ddress fi	rst.										
Street Name and Number	er	Cit	ty	Prov	ine	ce or Sta	ite	Country	М	Fr onth	om Yes	T Month	o Year	
1072 Beryl Trall		Centerviil	0	ОН				USA		06	2016	6 Present	Time	
1711-18 Graydon Hall Drive		Toronto		ON				Canada		07	2016	05	2017	
24-11 Plaissance Road		Richmon	d Hill	ON				Canada		06 2012		2 06	2016	
Applicant's last address outsi	de the Uni	ited States o	f more t	han 1 y	en.	r.								
Street Name and Numbe		City				Province or State		te	Country		From Month		r Month	Year
			-	-			+	r Mottes					rear	
A police ptie ampleument last	five was	(16 name a	o eteto \	List per	000	nt omn	losie	oant first						
Applicant's employment last			o scate.)	rist pro	280		_		T	From	m	To		
Full Name an		7915 Washing	ton Wood n	riva.	1			pation (Specify)	Mor		Year	-	Year	
LSS Software Holdings, Inc.	_	Dayton, OH 453 West Wile	43 KW SZ	(60)	1	_		& CEO (Subsidiary	1)1	2010	Present	Time	
Lean Software Services, Inc	.	Richmand Hill	, Ontario, C	anada	1	Founde	. & 1e	CEO (Parent Company))2	2002	Present		
					1				-					
					1				-					
					1									
ast occupation abroad if not	shown abo	ove. (Includ	e all info	rmatio	n r	equest	ed al	bove.)	Т	-				
See Above This form is submitted in connection	n with an an	mlication for			4	Plane.	_	Amplicant	1			Date		
Naturalization	_	Specify):				oignain	re of	Applicant			11	12	221-	
Status as Permanent Resident	Onioi (L					_	1				Щ	Dy 25,	K)[7	
f your native alphabet is in other th	an Roman k	etters, write y	our name i	in your n	ati	ve appar	bet be	elow:			1	1 1		
N/A						1/					/	/		
Penalties: Severe penalties		•		_	-	1/				_		al fact.		
Applicant: Print your na					er	if the	box		y bore					
Complete This Box (Family Name	e)	-	liven Nan	ne)				(Middle Name)		(egistration Nu	imber)	
LARSEN		Bj	orn								A			

Department of Homeland SecurityU.S. Citizenship and Immigration Services

OMB No. 1615-0023; Expires 12/31/18 Form I-485, Application to Register Permanent Residence or Adjust Status

START HERE - Type or Print (Use bl	For USCIS Use Only	
Part 1. Information About You		Returned Receipt
Family Name (Last Name) Given Nam	ne (First Name) Middle Name	1
LARSEN Bjorn		
Address - Street Number and Name	Apt. No.	
1072 Beryl Trail		Resubmitted
C/O (in care of)		
City	State ZIP Code	Reloc Sent
Centerville	OH 45459	
Date of Birth (mm/dd/yyyy)	Country of Birth	de-
05/03/1950	Norway	
Country of Citizenship/Nationality U.S	Social Security No. (if any) A-Number (if any)	Reloc Rec'd
	602903	
Date of Last Arrival (mm/dd/yyyy)	I-94 Arrival-Departure Record Number	
		Applicant
Current USCIS Status	Expires on (mm/dd/vyyy)	Interviewed
L-1	07/20/2018	
Part 2. Application Type (Select or		Section of Law
I am applying for an adjustment to per	manent resident status because:	Sec 209(a), INA
that has been approved. (Attach a cimmigrant juvenile, or special immapplication that will give you an in b. My spouse or parent applied for ac	in immediately available immigrant visa number copy of the approval notice, or a relative, special nigrant military visa petition filed with this numediately available visa number, if approved.) fjustment of status or was granted lawful ant visa category that allows derivative status	Sec 209(b), INA Sec, 13, Act of 9/11/57 Sec. 245, INA Sec 249, INA Sec 1 Act of 11/2/66 Sec 2 Act of 11/2/66 Other
for spouses and children. c. I entered as a K-1 fiancé(e) of a U.	S. citizen whom I married within 90 days of	Country Chargeable
petition approval notice and the ma		Eligibility Under Sec. 245
granted asylum and am eligible for	asylum status as the spouse or child of a person adjustment. mitted or paroled into the United States after	Dependent of Principal Atlen Special Immigrant
	re been physically present in the United States	Other Preference
(e), and I am residing with that pers	nmarried child of a Cuban described above in son, and was admitted or paroled into the United creafter have been physically present in the	Action Block
g. 🔲 I have continuously resided in the I	United States since before January 1, 1972.	
status has not been terminated, and	for example, I was admitted as a refugee, my I have been physically present in the United Fadditional space is needed, see Page 3 of the	
permanent residence adjusted to the da a nonimmigrant or parolee, or as of Ma (Select one)		To be Completed by Attorney or Representative, if any Fill in box if Form G-28 is attached to represent the applicant
. 🔲 I am a native or citizen of Cuba and	meet the description in (e) above.	VOLAG No
I am the husband, wife, or minor un description in (f) above.	married child of a Cuban and meet the	ATTY State License Number N/A



. City/Town/Village of Birth		Current Occupa					
Sandnes		Founder & CEC)				
Your Mother's First Name		Your Father's First Name					
Kirsten		Torstein					
Provide your name exactly as it appear	ears on your Form 1-94, Arriv	al-Departure Reco	rd Number				
Bjorn Larsen							
Place of Last Entry Into the United S (City/State)			Visitor, student, exchange er, without inspection, etc.)				
Toronto, Canada: Pearson Airport		L-1					
Were you inspected by a U.S. Immig	ration Officer? Yes	No 🗌					
Nonimmigrant Visa Number		Consulate When	e Visa Was Issued	1			
N/A		N/A					
Total management	Gender Male Female	Marital Status Married	Single X	Divorced Widowed			
Have you ever applied for permanent	t resident status in the U.S.?		" give date and plo al disposition.)	ace of No			
List your present spouse and all of you	our children (include adult so	ns and daughters).	(If you have none	e, write "None." If additiona			
List your present spouse and all of yo space is needed, see Page 3 of the instantily Name (Last Name)	our children (include adult so structions.) Given Name (First N		(If you have none	- 1300A4848484			
space is needed, see Page 3 of the ins Family Name (Last Name)	Given Name (First N	lame)	Middle Initial	Date of Birth (mm/dd/yyyy			
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Part 3. Processing Inform	nation (Continued)		
or similar group in the Unit write "None." Include the n	nembership in or affiliation with every orge ted States or in other places since your 16th lame of each organization, location, nature, aper. Continuation pages must be submitted Instructions.	birthday. Include any military servi- and dates of membership. If additions	ce in this part. If none, al space is needed,
Name of Organization	Location and Nature	Date of Membership From	Date of Membership To
None			
nust be submitted according to locumentation that must be inchean that you are not entitled to. Have you EVER, in or outsi a. Knowingly committed ar arrested? b. Been arrested, cited, char or ordinance, excluding to. Been the beneficiary of a d. Exercised diplomatic impact. Have you received public assets.	ny crime of moral turpitude or a drug-relate rged, indicted, convicted, fined, or imprisor traffic violations? pardon, amnesty, rehabilitation decree, oth munity to avoid prosecution for a criminal of sistance in the United States from any source unicipality (other than emergency medical i	nstructions under General Instruction of in this section.) Answering "Yes" of idence. d offense for which you have not been ed for breaking or violating any law her act of elemency, or similar action? Offense in the United States? ee, including the U.S. Government or	ns. Information about loes not necessarily n Yes No Yes N
. Have you EVER:			
a. Within the past 10 years lactivities in the future?	been a prostitute or procured anyone for pro	ostitution, or intend to engage in such	Yes No
b. Engaged in any unlawful	commercialized vice, including, but not lin	nited to, illegal gambling?	Yes No 🔀
c. Knowingly encouraged, it illegally?	nduced, assisted, abetted, or aided any alien	to try to enter the United States	Yes No X
 Illicitly trafficked in any trafficking of any control 	controlled substance, or knowingly assisted led substance?	l, abetted, or colluded in the illicit	Yes No
membership or funds for, or l	, conspired to engage in, or do you intend to have you through any means ever assisted of unization that has ever engaged or conspired	or provided any type of material	d Yes No

Pa	rt 3. Processing Information (Continued)		0802.0
	Do you intend to engage in the United States in:		
	a. Espionage?	Yes	No 🔀
	b. Any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence, or other unlawful means?	Yes	No 🔀
	c. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information?	Yes	No 🔀
6.	Have you EVER been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?	Yes	No 🔀
7.	Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion?	Yes	No 🔀
8.	Have you EVER been deported from the United States, or removed from the United States at government expense, excluded within the past year, or are you now in exclusion, deportation, removal, or rescission proceedings?	Yes	No 🔀
9.	Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act (INA) for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States, or any immigration benefit?	Yes	No 🔀
10.	Have you EVER left the United States to avoid being drafted into the U.S. Armed Forces?	Yes	No 🗙
11.	Have you EVER been a J nonimmigrant exchange visitor who was subject to the 2-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver?	Yes	No X
12.	Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child?	Yes	NoX
13.	Do you plan to practice polygamy in the United States?	Yes	No 🔀
14.	Have you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:		
	a. Acts involving torture or genocide?	Yes	No X
	b. Killing any person?	Yes	No X
	c. Intentionally and severely injuring any person?	Yes	No 🔀
	d. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?	Yes	No X
	e. Limiting or denying any person's ability to exercise religious beliefs?	Yes	No X
15.	Have you EVER:		_
	a. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?	Yes	No 🔀
	b. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?	Yes	NoX
	Have you EVER been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?	Yes	No 🔀

Contract Con		
Part 3. F	rocessing Information (Continued)	
knowle	ou EVER assisted or participated in selling or providing weapons to any person who to your dge used them against another person, or in transporting weapons to any person who to your dge used them against another person?	Yes No
18. Have ye	ou EVER received any type of military, paramilitary, or weapons training?	Yes No 🗙
	Accommodations for Individuals With Disabilities and/or Impairments (See Page 7 of performents this section.)	the instructions
Are you rec	uesting an accommodation because of your disability(ies) and/or impairment(s)?	Yes No X
If you answ	vered "Yes," select any applicable box:	
a.	I am deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-landicate which language (e.g., American Sign Language)):	guage interpreter,
	N/A	
□ b.	I am blind or sight-impaired and request the following accommodation(s):	
	N/A	
□ c.	I have another type of disability and/or impairment (describe the nature of your disability(ies) and accommodation(s) you are requesting):	/or impairment(s) and
	N/A	

Part 5. Signature (Read the information on penalties on Page 8 of the instructions before completing this section. You must file this application while in the United States.)

Your Registration With U.S. Citizenship and Immigration Services

"I understand and acknowledge that, under section 262 of the Immigration and Nationality Act (INA), as an alien who has been or will be in the United States for more than 30 days, I am required to register with U.S. Citizenship and Immigration Services (USCIS). I understand and acknowledge that, under section 265 of the INA, I am required to provide USCIS with my current address and written notice of any change of address within 10 days of the change. I understand and acknowledge that USCIS will use the most recent address that I provide to USCIS, on any form containing these acknowledgements, for all purposes, including the service of a Notice to Appear should it be necessary for USCIS to initiate removal proceedings against me. I understand and acknowledge that if I change my address without providing written notice to USCIS, I will be held responsible for any communications sent to me at the most recent address that I provided to USCIS. I further understand and acknowledge that, if removal proceedings are initiated against me and I fail to attend any hearing, including an initial hearing based on service of the Notice to Appear at the most recent address that I provided to USCIS or as otherwise provided by law, I may be ordered removed in my absence, arrested, and removed from the United States."

Selective Service Registration

The following applies to you if you are a male at least 18 years of age, but not yet 26 years of age, who is required to register with the Selective Service System: "I understand that my filing Form I-485 with U.S. Citizenship and Immigration Services (USCIS) authorizes USCIS to provide certain registration information to the Selective Service System in accordance with the Military Selective Service Act. Upon USCIS acceptance of my application, I authorize USCIS to transmit to the Selective Service System my name, current address, Social Security Number, date of birth, and the date I filed the application for the purpose of recording my Selective Service registration as of the filing date. If, however, USCIS does not accept my application, I further understand that, if so required, I am responsible for registering with the Selective Service by other means, provided I have not yet reached 26 years of age."

Part 5. Signature (Continued)				
	Applicant's Statement (Se	lect one)		
I can read and understand English, and as my answer to each question.	d I have read and understand each a	nd every quest	ion and instructi	on on this form, as well
Each and every question and instruction language, a language, a language. I understand each and every	anguage in which I am fluent, by the	person name	d in Interprete r	's Statement and
I certify, under penalty of perjury under the all true and correct. I certify also that I ha				
I authorize the release of any information determine eligibility for the benefit I am s		ip and Immig	ration Services (
Signature (Applicant)	D.C., Transport		Date (minidaly yyy)	Daytime Phone Number (include area code)
Signature (Applicant)	Print Your Full Name Bjorn LARSEN		5/2/2/	(307) 275-6956
NOTE: If you do not completely fill out the eligible for the requested benefit, and this			d in the Instruct	ions, you may not be found
I certify that I am fluent in English and the				
I further certify that I have read cach and e applicant in the above-mentioned language well as the answer to each question.			instruction and	question on the form, as
Signature (Interpreter)	Print Your Full Name		Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
Part 6. Signature of Person Prepari	ng Form, If Other Than Abov	2		
I declare that I prepared this application have knowledge.	at the request of the above appli	cant, and it is	based on all in	
Signature A	Print Your Full Name		Date (mm/dd/yyyy)	Daytime Phone Number (include area code)
Church Fall	Jennifer Behm, Esq.		52617	(716) 634-1010
Firm Name and Address		Email Add	iress (if any)	
Berardi Immigration Law, 230 NY 14221	0 Wehrle Drive, Buffalo,	1	ness (<i>y any)</i> Isimmiswyer.com	





Application For Employment Authorization

USCIS Form I-765

Department of Homeland Security
U.S. Citizenship and Immigration Services

Form 1-765 OMB No. 1615-0040 Expires 02/28/2018

	Fee Stamp		Action	Block	Initial Receipt	Resubmitted
	SCIS	Ī			Relo	cated
	Use				Received	Sent
0	Poly				Comi	pleted
	Application Approved	☐ Application Den	ied - Faile	d to establish:	Approved	Denied
5	Authorization/Extension Valid From	☐ Eligibility und 8 CFR 2742.13		Economic necessity under 8 CFR 274a,12(c)(14), (18)		
	Authorization/Extension Valid To	(a) or (c)		and 8 CFR 214.2(f)	A#	
S	Subject to the following conditions:			☐ Applicant is filing under	section 274a.12_	
>	START HERE - Type or print in black ink.					
an	n applying for:	9.		Security Number (Inched)	ude all number	s you have
X	Permission to accept employment.		06760			
	Replacement (of lost employment authorization doc					
	Renewal of my permission to accept employment (a copy of your previous employment authorization	ittach a 10.		legistration Number (/ r (if any)	A-Number) or	Form 1-94
	document).				357656577	35
١.	Full Name	tt.		ou ever before applied	for employm	ent
	Family Name First Name Middle	e Name		ization from USCIS? s (Complete the followi	na questions \	
	LARSEN Bjorn			s (Complete the follow) nich USCIS Office?	ng questions.) Dati	0.0
	Other Names Used (include Maiden Name)		VV I	iicii OSCIS OTICC:	- Dai	22
	Family Name First Name Middle	e Name		1. (7. (1. 15. 1		
	None		Res	sults (Granted or Denied	1 - auach au de	cumentation
	U.S. Mailing Address		X No	(Proceed to Question 1	2.)	
	-	12.	Date of	Last Entry into the U.	.S., on or abou	ıt
1		Number	(mm/dd	-		
	1072 Beryl Trail		04/23/2	2017		
D	Town or City State ZIP C	ode 13.	Place of	Last Entry into the U	.s.	
	Centerville OH 45459		Toron	to, Canada: Pearsor	Airport	
03	Country of Citizenship or Nationality	14.	Status a	at Last Entry (B-2 Visi	tor, F-1 Studer	nt, No Lawfi
	Canada & Norway Canada & Norw		Status, 6			
. 1	Place of Birth		L-1			
•	Town or City State/Province Cou	intry 15.	Curren	t Immigration Status (Visitor, Studen	nt, etc.)
	Sandnes Norway		L-1			
. (Date of Birth (mm/dd/yyyy) Gender Male Female Marital Status		I-765?" the letter	ity Category. Go to the section of the Instruction of the Instruction rand number of the eliging instructions. For exam	ns. In the spaci ibility category	e below, plac you selected
[☐ Single ☐ Married ☒ Divorced ☐ Wie	idowed			(<u>s</u>)(<u>s</u>) {

17.	. (c)(3)(C) Eligibility Category. If you entered the		Certification		
	your degree, your employer's E-	B)(C) in Question 16 above, list byer's name as listed in E-Verify, Verify Company Identification wify Client Company Identification low.	I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I authorize the release of any information that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the "Who May File Form I-765?" section of the instructions		
	Degree En	ployer's Name as listed in E-Verity	and have identified the appropriate eligibility category in		
	N/A N	/A	Question 16.		
		ompany Identification Number or a company Identification Number	Applicant's Signature		
	N/A		Date of Signature (mm/dd/yyyy) 572277		
18.	category (c)(26) in Que	gory. If you entered the eligibility stion 16 above, please provide the H-1B principal spouse's most recent pproval for Form I-129.	Teephone Number (307) 275-6956		
	N/A		Signature of Person Preparing Form, If Other Than Applicant		
19.	(c)(35) and (c)(36) Elig	ibility Category	I declare that this document was prepared by me at the request		
	a. If you entered the eligibility category (c)(35) or (c)(36) in Question 16 above, please provide the receipt number of the Form I-140 beneficiary's Form I-797 Notice of Approval for Form I-140.		of the applicant and is based on all information of which I have any knowledge. Preparer's Signature		
	N/A		Course tall		
	b. Have you EVER be any crime?	ten arrested for and/or convicted of Yes No	Date of Signature (mm/dd/yyyy) 5/24/26/7 Printed Name		
		d "Yes" to Item Numbers 19.b.,	Jennifer Behm, Esq.		
		., Item H. or Item I. in the Who ection of these Instructions for	Address		
	information about providing court dispositions.		Berardi Immigration Law 2300 Wehrle Drive Buffalo, NY 14221		



Application for Travel Document

Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS Form I-131 OMB No. 1615-0013 Expires 12/31/2018

US	or CIS se aly	Receipt			Action Block	To Be Completed by an Attorney/ Representative, if any.
"		Date:				X Fill in box if G-28 is attached to represent the applicant.
"	te-entry Permit (i Mail To" Section, Single Advance Pa	,	Mail To (Re-entry & Refugee Only)	□ US	dress in Part 1 Consulate at:	Attorney State License Number:
_		pe or Print in Black Ink	Tea II	- Pry		
1.b.	Family Name (Last Name) Given Name (First Name) Middle Name	LARSEN Bjorn		3.	her Information Alien Registration Number (A	a-Number)
2.a.	sical Address In Care of Nar			4 <i>,</i> 5.	Country of Birth Norway Country of Citizenship Canada & Norway	
	Street Number and Name Apt. Ste.	10/2 Heryl Trail		6.	Class of Admission	
	City or Town State OH	Centerville 2.f. ZIP Code 45459		7. 8.	Gender Male Fema Date of Birth (mm/dd/yyy)	ule v) ► 05/03/1950
_	Postal Code Province			9.	U.S. Social Security Number (▶ 0	(if any) 6 7 6 0 2 9 0 3
2.i.	Country USA					



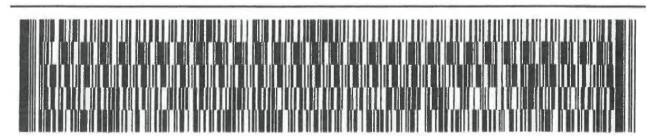
Form I-131 12/23/16 N

	-			
Part	2.	Application Type		
a. [I am a permanent resident or conditional resident of the United States, and I am applying for a reentry permit.	2.e.	Country of Birth
b. [I now hold U.S. refugee or asylee status, and I am applying for a Refugee Travel Document.	2.f.	Country of Citizenship
:. [I am a permanent resident as a direct result of refugee or asylee status, and I am applying for a Refugee Travel Document.	2.g.	Daytime Phone Number ())
1. [I am applying for an Advance Parole Document to allow me to return to the United States after temporary foreign travel.		In Care of Name
e. [I am outside the United States, and I am applying for an Advance Parole Document.	2.i.	Street Number
r. [I am applying for an Advance Parole Document for a person who is outside the United States.	2.j,	Apt. Ste. Fir.
		cked box "1.f." provide the following information person in 2.a. through 2.p.	2.k.	City or Town
		ily Name	2.l.	State 2.m. ZIP Code Postal Code
		n Name		Province
		of Birth (mm/dd/yyyy)	2.p.	Country USA
art :	3.	Processing Information		THE COURSE THE PROPERTY OF
		of Intended Departure (mm/dd/yyyy) > 09/01/2017 ceted Length of Trip (in days)	4.a.	Have you ever before been issued a reentry permit or Refugee Travel Document? (If "Yes" give the following information for the last document issued to you): Yes X No
in	ı ex	you, or any person included in this application, now clusion, deportation, removal, or rescission seedings?	4.b. 4.c.	Date Issued (mm/dd/yyyy) > Disposition (uttached, lost, etc.):
. If	f"Y	es", Name of DHS office:		
		applying for a non-DACA related Advance Parole Do	ocu men	t, skip to Part 7; DACA recipients must complete Part 4

Form I-131 12/23/16 N

Page 2 of 5

1.	Country from which you are a refugee or asylee;		3.c.	Applied for and/or received any benefit from such country (for example, health insurance benefits)?		
If yo	u answer "Yes" to any of the followi	ng questions, you		(Silani, p.e.)	Yes	□No
mus	t explain on a separate sheet of paper te and A-Number on the top of each s	r. Include your		e you were accorded refugee/asylee stat egal procedure or voluntary act:	us, have y	ou, by
2.	Do you plan to travel to the country named above?	Yes No	4.a.	Reacquired the nationality of the country named above?	Yes	□ No
Since	e you were accorded refugee/asylee sta	tus, have you ever:	4.b.	Acquired a new nationality?	Yes	☐ No
3.a.	Returned to the country named above?	☐ Yes ☐ No	4.c.	Been granted refugee or asylee status in any other country?	Yes	No
3.b.	Applied for and/or obtained a national renewal, or entry permit of that country					
		Yes No				
	t 7. Complete Only If Applyin		-	In Comp of Name		
	On a separate sheet of paper, explain how you qualify for an Advance Parole Document, and what circumstances warrant issuance of advance parole. Include copies of any documents you wish considered. (See instructions.)		4.a.	In Care of Name		
issua			4.b.	Street Number		
you v 1.	How many trips do you intend to use	this document?	7.0.	and Name		
••	One Trip 🔀 More than one trip		4.c.	Apt. Ste. Flr.		
	person intended to receive an Advance		4.d.	City or Town		
and C	side the United States, provide the local Country) of the U.S. Embassy or consul		4.e.	State 4.f. ZIP Code		
	eas office that you want us to notify.		4.g.	Postal Code		
z.a.	City or Town		4.h.	Province		
2.b.	Country					
	N/A		4.i.	Country		
	travel document will be delivered to as should the notice to pick up the document		4.j.	Daytime Phone Number ()	. , ~	
3.	To the address shown in Part 2 (2 of this form.	2.h. through 2.p.)				
1.	To the address shown in Part 7 (4 of this form.	i.a. through 4.i.)				



Pa:	I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. Signature of applicant rt 9. Information About Person Who Prepared 7	 Date of Signature (mm/dd/yyyy) Daytime Phone Number (307) 275 - 695 NOTE: If you do not completely fill out this form or fail to submit required documents listed in the instructions, your application may be denied. This Application, If Other Than the Applicant		
subn as A appli	TE: If you are an attorney or representative, you must not a completed Form G-28, Notice of Entry of Appearance attorney or Accredited Representative, along with this ication.	Preparer's Contact Information 4. Preparer's Daytime Phone Number Extension (716) 634 - 1010		
	Preparer's Family Name (Last Name)	5. Preparer's E-mail Address ((fany) jebehm@usimmlawyer.com		
	ВЕНМ	Declaration		
l,b,	Preparer's Given Name (First Name) Jennifer	To be completed by all preparers, including attorneys and authorized representatives: I declare that I prepared this benefit		
<u>.</u>	Preparer's Business or Organization Name	request at the request of the applicant, that it is based on all the information of which I have knowledge, and that the		
2. Preparers Business or Organization Name Berardi Immigration Law		information of which I have knowledge, and that the information is true to the best of my knowledge.		
Pre	parer's Mailing Address	6.a. Signature of Preparer		
3.a.	Street Number and Name 2300 Wehrle Drive	6.b. Date of Signature (mm/dd/yyyy) ► 5/20/2017		
.b.	Apt. Ste. Fir.	2000		
.c.	City or Town Buffalo	NOTE: If you require more space to provide any additional information, use a separate sheet of paper. You must include		
.d.	State NY 3.e. ZIP Code 14221	your Name and A-Number on the top of each sheet.		
	Postal Code			
	Province			
la.	Country USA			



Most Recent I-94

Admission (I-94) Record Number: 22960500940

Most Recent Date of Entry: 2017 May 29

Class of Admission: L1

Admit Until Date: 07 / 20 / 2018

Details provided on the I-94 Information form:

Last/Surname:

LARSEN

First (Given) Name:

BJORN

Birth Date:

1950May03

Passport Number:

GK584922

Country of Issuance:

Canada

Get Travel History

Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

if an employer, local, state or federal agency requests admission information, present your admission (f-94) number along with any additional required documents requested by that employer or agency.

Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

OMB No. 1651-0111

For Inquiries or questions regarding your I-94, please click here

Accessibility Privacy Policy

• The ability to create and pay for a Provisional I-94 will be disrupted during the times listed below. The options to view travel history or most recent I-94 will be available during this time.

X

6 Saturday, May 6, 2017 6:00pm - 12:00am (18:00 - 24:00) EDT



Most Recent I-94

Admission (I-94) Record Number: 35765657785

Most Recent Date of Entry: 2017 April 23

Class of Admission: L1

Admit Until Date: 07 / 20 / 2018

Details provided on the I-94 Information form:

Last/Surname:

LARSEN

First (Given) Name:

BJORN

Birth Date:

1950May03

Passport Number:

GK584922

Country of Issuance ;

Canada

Get Travel History

▶ Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

if an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

OM# No. 1651-0111

For inquiries or questions regarding your I-94, please click here

Accessibility | Privacy Policy

THIS NOTICE DOES NOT GRANT ANY IMMIGRATION STATUS OR BENEFIT.

RECEIPT NUMBER EAC-15-217-50844		CASE TYPE 1129 PETITION FOR A NONIMMIGRANT WORKER
RECEIPT DATE August 3, 2015	PRIORITY DATE	PETITIONER LLS SOFTWARE HOLDINGS INC
NOTICE DATE August 7, 2015	PAGE 1 of 1	BENEFICIARY LARSEN, BJORN
JAMES G MEAGLEY JAECKLE FLEISCHMANN & M AVANT BLDG STE 900 200 DELAWARE AVENUE BUFFALO NY 14202-2107	NUGEL LLP	Notice Type: Approval Notice Class: L1A Valid from 07/21/2015 to 07/20/2018 Consulate: POE: BUFFALO, NY

This notice is to advise you of action taken on this case. The official notice has been mailed according to the mailing preferences noted on the Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative. Any relevant documentation was mailed according to the specified mailing preferences.

This is to confirm the approval of the above petition. It was filed at the port of entry pursuant to the provisions of the North American Free Trade Agreement (NAFTA). The petition is valid for the period shown above.

This completes our action on this petition.

The lower portion of this notice should be shown at the port of entry whenever the named worker(s) wants to enter the U.S. in the classification above, during the period of validity of the petition.

Please read the back of this form carefully for more information. If you have any questions about tax withholding, please contact the Internal Revenue Service.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa, for admission to the United States, or for an extension, change, or adjustment of status.

This courtesy copy may not be used in lieu of official notification to demonstrate the filing or processing action taken on this case.

THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.

Number of workers: 1

Name LARSEN, BJORN DOB COB

05/03/1950 NORWAY

Class Consulate / POE OCC L1A BUF

The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at www.ombudsman.sba.gov or phone 202-205-2417 or fax 202-481-5719.

NOTICE: Although this application/petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify the information submitted in this application, petition and/or supporting documentation to ensure conformity with applicable laws, rules, regulations, and other authorities. Methods used for verifying information may include, but are not limited to, the review of public information and records, contact by correspondence, the internet, or telephone, and site inspections of businesses and residences. Information obtained during the course of verification will be used to determine whether revocation, rescission, and/or removal proceedings are appropriate. Applicants, petitioners, and representatives of record will be provided an opportunity to address derogatory information before any formal proceeding is initiated.

Please see the additional information on the back. You will be notified separately about any other cases you filed. U.S. CITIZENSHIP & IMMIGRATION SVCS

VERMONT SERVICE CENTER

75 LOWER WELDEN STREET

VT 05479-0001 SAINT ALBANS

Customer Service Telephone: (800) 375-5283



Department of Homeland Security U.S. Oltisenship and Immigration Ser

1-797B. Notice of Action

EAC-13-210-50717	9/7////////////////////////////////////	CASETYPE 1129 PETITION FOR A NONIMMIGRANT WORKE	1
RECEIPT DATE Ouly 25, 2013	PRIORITY DATE	DETITIONER LSS SOFTWARE HOLDINGS INC	17
Notice bate August 6, 2013	PAGE 1 of 2	BENEFICIARY LARSEN, BJORN	
11.12.12.12.13.17	the state of the s	1 A L L 2 J L L L L L L L L L L L L L L L L	n,

JAECKLE FLEISCHMANN 4 MUGEL LLP 200 DELAWARE AVENUE AVANT BUILDING SUITE 900 BUFFALO NY 14202-2107

Notice Type: Approval Notice Class: LIA Valid from 07/19/2013 to 07/18/2015

the petition.

the port of entry pursuant to the province valle for the portod shown above. This is to confirm the approval of the above petition. of the North American Free Trade Agreement (NAFTA).

This completes our action on this petition.

The lower portion of this notice should be shown at the U.S. in the classification above, during the perio

Please read the beck of this form carefully for more in please contact the internal Revenue Service.

The approval of this wise polition floes not in itself grastien beneficiery, will, subsequently be found to be eligib an extension, change, or adjustment of status,

THIS FORM IS NOT A VISA NOR MAY IT BE USED IN SLACE OF A V

Number of workers: 1 DARSEN, BJORN

DOB . 65/03/1950 NORMAY

Class Consolate / POE OCC BDF! EIA.

you have any questions about tax withholding

ation scatus and does not guarantee that for admission to the United States, or for

The Small Business Regulatory Enforcement and Fairness Act ostabil d the office of the National Ombudanan (ONO) at the Small Business Administration. The QNO assists apoll businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at why combudemen, she govern phone 202-206-2417 for tax/202-481-5719.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

O.S. CITIZENSHIP & IMMIGRATION SVCS

YERMONT SERVICE CENTER

75 LOWER WELDEN STREET

1

The alien may use this portion when applying for a visa at an American consulate abroad, or if no visa is required, when applying for admission to the U.S. Case Type 1129

Receipt#: £ac-19-210-50717 Notice Date: August 6, 2013

Notice Date: August 6, 2013 Petitioner: LSS SOFTWARE HOLDINGS INC

Pétitioner Validity Dates: Valid from 07/19/2013 to 07/18/2015. Number of Workers: 1: Clase Consulate /

05/03/1850 NORWAY

Department of Homeland Security. U.S. Chizenship and implifyration Services.

RECEPT NUMBER EAC-12-210-50085	CASE TYPE 1129 PETITION FOR A NONIMMIGRANT WORKE
RECEIPT DATE PRIORITY DATE	LSS SOFTWARE HOLDINGS INC
August/6, 2012 PAGE 1 of 2	LARSEN, BJORN
JAMES G MEAGLEY JAECKLE FREISCHMANN & MUGEL INP AVANT BUYNDING & SUITE 900 200 DELAWARE AVENUE BUFFALO NY 14202-2107	Notice Type: Approval Notice Class: 11A Valid Trom 07/17/2012 to 07/16/2013
This is to confirm the approval of the above patition, It of the North American Free Trade Agreement (NAFTA). The	has tive of the port of entry pursuant to the provisions
whis completes our action on this periodo.	
The lower portion of this hotics should be shown at the the B.S. In the classification above, during the period	of the wants to enter / / wants to enter / / / / / / / / / / / / / / / / / / /
Please read the back of this form chrestily for more info please contact the Internal Revenue Service.	imition () It you have any guestions about tax withholding.
The approval of this visa petition does not in itself gra allen beneficiary will subsequently be found to be eligib an extension; change, or edjustment of etatus. THIS FORM IS NOT A VISH NOR MAY IT BE USED IN PLACE OF A	nt Miv immerstion/status and does not guarantee that the life to read the for edmission to the United States; or For
Number of Morkeys: 1 Name COB COB LARSEN, BJORN 05/03/1950 NORWA	Class Consulate / POE OCC. Y DAM PBB 010
The Small Business Reputatory Enforcement and Fairness Acat the Small Business Administration. The ONO assists and if you are a small business with a comment or complaint a way, bubidshap spare you or phone 202-205-2419 or fax 202-48	lr businesses with issues related to rederal regulations.
アクスプススクアンメング アンチンス カスチャイススト	ナーフィング・アングニペング・アンファイン はままなな アンギモディ

Please see the additional information on the back. You will be notified separately about any other cases you filed.

U.S. CITIZENSHIP 5. IMMIGRATION SVCS.

VERMONT SERVICE CENTER.

75 LOWER WELDEN STREET.

SAINT ALBANS. VT 05479-0001.

Custemer Service Telephone. (800) 375-5283.

From 1797B/(Rev. 10/31705)N

Please test off portion below and forward it to the alien worker.

The alien may use this portion when applying for a visa at an American consulate abroad, or if no visa is required, when applying for admission to the U.S.

Accespta: Eac-12-210-50055

Case Type: 1129

Rotice Date: August 5. 2012

Fettioner Verlidity Detes: Velid from 97/17/2012/to 03/16/2013 Mumber of Workers: 1

Name

DOB

Class Consulate POE GOC

1087081950 NORWAY

1/19. PBB / 010



U.S. Customs and Border Protection Buffalo, NY Port# 10901

** Contact Number **
** 716-843-8324 **

570- I-94 ArDep 555- I-129 Workr

\$6.00 \$325.00

TOTAL CASH \$331.00

CLS CNT: 2

USER 321 5548 operator 10:51AM 07/19/13 0009-001

U.S. Customs and Border Protection Buffalo, NY Port# 10901

** Contact Number **
** 716-843-8324 **

570- I-94 ArDep 555- I-129 Workr 566- Fraud/Det \$6.00 \$325.00 \$500.00

TOTAL

\$831.00 \$831.00

CLS CNT: 3

USER 321 5993

9:37AM 07/17/12 000

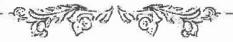
operator 0009-001



WWW.SILVERGATETRANSLATIONS.COM



RANSLATION



Translation Date Reference Number May 24, 2017 35220067 Source Language **Target Language** Norwegian English Description of Translated Document Birth Certificate of Bjørn Larsen

I, Sar judgm render
This to does to sandr.
ATA I, Sandra Bird, hereby certify that the following is complete and accurate to the best of my judgment and ability, and that I am competent in both the Norwegian and English languages to render such translation.

This translation certificate speaks only to the accuracy of the translation performed below, and does not speak to the original content of the source document(s).

ATA Member



idra Bi

Certified Silvergate Translation File Number 3522067 Page 1 of 2

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T:410,358.3588/F: 410,497,1121 • www.silvergatetranslations.com

nerican Translators

THE CHURCH OF NORWAY

Birth Certificate

For boy / girl	Last name
• •	Larsen
	First name
	Bjørn
Born	Date and year
	May 3, 1950 [illegible]
	in
	Sandnes
Christened	Date and year
	June 16, 1950
	in
	Høyland
Parents (in case the	
child was adopted, please state the	[Illegible] Torstein Hasbro Larsen
names of the	
adoptive parents):	and Kirsten Beate, née Øgland
The certificate is	Parish
issued based on the	Høyland
church records of	City/ Parish
	Sandnes

Sacristan's office

May 6, 1966

Andreas Hindal

[Signature]

Signature

[Initials]

Payment NOK-5.00

No payment

Form 4



Certified Silvergate Translation File Number 3522067 Page 2 of 2

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T:410.358.3588/F: 410.497.1121 = www.slivergatetranslations.com



ORSKE KI	RKE Dåpsattest	
For gutt / pilce	slektsnavn Lasden: fornavn Barra:	
Født	Sandnes Sandnes	
Døpt .	dato og år 16- sikerlande gile sa	
Foreidie (dersom vedk. er adoptert, skal adoptiv- foreidrene fores opp som foreidre)	gernail. Forsken Karlo Laisen	
Attesten er utskrift av kirkeboka for	by/pressegfeld Panelnes	
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lankett 4		



ONTARIO SUPERIOR COURT OF JUSTICE

CERTIFICATE OF DIVORCE

This is to certify that the marriage of BJORN LARSEN and MAJDA PUSIC LARSEN which was solemnized in the city of North York in the province of Ontario, in the Country of Canada on the 31st, day of December 1984 was dissolved by a judgment of this court which became effective onJune 29, 2003.....

Issued by

Local registrar

393 UNIVERSITY AVE: 10TH FLOOR

TORONTO, ONTARIO

M5G 1E6

393 AVE. UNIVERSITY

10E ÉTAGE

TORONTO, ONTARIO

M5G 1E8

NO. 296-55433-2009

IN THE MATTER OF	§ IN THE DISTRICT COURT	
THE MARRIAGE OF	8	
	§ 296TH JUDICIAL DISTRIC	Г
NANCY LARSEN	§	
AND	Š	
BJORN LARSEN	8 COLLIN COUNTY, TEXAS	

AGREED FINAL DECREE OF DIVORCE

On the 4 day of FUBRURY, 2010, the Court heard this case.

I. Appearances

Nancy Larsen, Petitioner, appeared in person and through attorney of record, Karen Keltz of Calabrese Huff, and announced ready for trial.

Bjorn Larsen, Respondent, did not appear in person but has agreed to the terms of this Judgment to the extent permitted by law as evidenced by his signature below.

II. Record

The making of a record of testimony was waived by the parties with the consent of the Court.

III. Jurisdiction and Domicile

The Court finds that the pleadings are in due form and contain all the allegations, information, and prerequisites required by law. The Court, after receiving evidence, finds that it has jurisdiction of this case and of all the parties and that at least sixty days have elapsed since the date the suit was filed. The Court finds that, at the time this suit was filed, Nancy Larsen had been a domiciliary of Texas for the preceding six-month period and a resident of the county in which this suit was filed for the preceding ninety-day period. All persons entitled to citation were properly cited.

IV. Jury

A jury was waived, and questions of fact and of law were submitted to the Court.

V. Agreement of Parties

The Court finds that the parties have entered into a written agreement as contained in this decree by virtue of having approved this decree as to both form and substance. To the extent permitted by law, the parties stipulate the agreement is enforceable as a contract. The Court approves the agreement of the parties as contained in this Final Decree of Divorce.

VI. Divorce

IT IS ORDERED AND DECREED that Nancy Larsen, and Bjorn Larsen, are divorced and that the marriage between them is dissolved on the ground of insupportability.

VII. Children of the Marriage

The Court finds that there are no children of the marriage of Nancy Larsen and Bjorn Larsen and none is expected.

VIII. Division of Marital Estate

The Court finds that the following is a just and right division of the parties' marital estate, having due regard for the rights of each party.



APPROVED AS TO FORM ONLY:

CALABRESE HUFF, P.C.

5944 Luther Lane, Suite 875

Dallas, Texas 75225 Tel: (214) 939 3000

Fax: (214) 939-3001

By:__

Karen Keltz

Attorney for Nancy Larsen State Bar No.11253700

APPROVED AND CONSENTED TO AS TO BOTH FORM AND SUBSTANCE:

Nancy Larser

Bjorn Larsen

